

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

Office Use Only

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

12FE4M5

NRCC

ADDRESS (number and street)

320 FIRST STREET SE

Check if different  
than previously  
reported. (ACC)

WASHINGTON

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00075820

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

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

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

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

Election on

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

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

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

Election on

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

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
02 01 2025

through

M M M / D D D / Y Y Y Y Y Y  
02 28 2025

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

Type or Print Name of Treasurer

WILLIAMS, KATY, , ,

Signature of Treasurer

WILLIAMS, KATY, , ,

Date

M M M / D D D / Y Y Y Y Y Y  
03 20 2025

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

NRCC

Report Covering the Period:

From:

MM / DD / YYYY  
02 / 01 / 2025

To:

MM / DD / YYYY  
02 / 28 / 2025

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2025		11084115.74
(b) Cash on Hand at Beginning of Reporting Period.....	12056440.99	
(c) Total Receipts (from Line 19) .....	9248907.91	15206061.65
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	21305348.90	26290177.39
7. Total Disbursements (from Line 31) .....	6338134.03	11322962.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	14967214.87	14967214.87
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	11250000.00	



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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

NRCC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
02	/	01	/	2025

To:

M M	/	D D	/	Y Y Y Y
02	/	28	/	2025

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1824980.25	2887963.33
(ii) Unitemized .....	2058734.68	4500341.96
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3883714.93	7388305.29
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1932223.37	3227357.37
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5815938.30	10615662.66
12. Transfers From Affiliated/Other Party Committees.....	1442646.08	1758910.72
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	3249.87	3249.87
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1987073.66	2828238.40
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	9248907.91	15206061.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9248907.91	15206061.65

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	3390896.97	6719137.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3390896.97	6719137.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	2500000.00	3750000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	136553.78	298130.13
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	15000.00	15000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	151553.78	313130.13
29. Other Disbursements (Including Non-Federal Donations).....	295683.28	540694.91
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6338134.03	11322962.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6338134.03	11322962.52



**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5815938.30	10615662.66
34. Total Contribution Refunds (from Line 28(d)) .....	151553.78	313130.13
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5664384.52	10302532.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	3390896.97	6719137.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	3249.87	3249.87
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	3387647.10	6715887.61

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: F3XN  
Transaction ID :

With respect to Schedule C, the interest rate for the Committee's Line of Credit is 2.95% plus one month average yield on US Treasury securities adjusted to a constant maturity of one month. The Commission's software specifications do not permit adding this text on this form.

Form/Schedule:  
Transaction ID:

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

FOR LINE NUMBER: PAGE 7 OF 6441

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ABRAMOWITZ, KENNETH, S., MR.,**

Mailing Address 411 HARBOR RD

City  
SOUTHPORTState  
CTZip Code  
06890-1376FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NGN CAPITALOccupation (for Individual)  
ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704612

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

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

**B. ACHESON, CAREN, , ,**

Mailing Address 2279 MARSTON PARK DRIVE

City  
MARIETTAState  
GAZip Code  
30062-5702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ATLANTA FINE HOMES SOTHEBYSOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748052

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. ADAMSON, BETTY, , ,**

Mailing Address 554 W 1660 N

City  
WASHINGTONState  
UTZip Code  
84780-8576FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.18

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27651200

Amount of Each Receipt this Period

200.00

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

2700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. ADAMS, CHARLES, , MR.,**

Mailing Address 1933 HARMONY DRIVE

City  
FORT COLLINSState  
COZip Code  
80525-3471FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671640

Amount of Each Receipt this Period

160.00

☐ Memo Item  
CONTRIBUTION

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

**B. AHR, FREDERICK, , ,**Mailing Address 1124 49TH ST  
UNIT 1City  
WEST DES MOINESState  
IAZip Code  
50266-4968FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721677

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. AKDOGAN, RECEP, , ,**

Mailing Address 423 W DUKE OF GLOUCESTER ST

City  
WILLIAMSBURGState  
VAZip Code  
23185-3602FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654174

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

660.00

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

FOR LINE NUMBER: PAGE 9 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ALBIN, ARLEN, L., MR.,**

Mailing Address 5701 W SAGEMOOR RD.

City  
PASCOState  
WAZip Code  
99301-8738FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27702382

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. ALBIN, ARLEN, L., MR.,**

Mailing Address 5701 W SAGEMOOR RD.

City  
PASCOState  
WAZip Code  
99301-8738FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741469

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

**C. ALBRIGHT, CHARLES, E., MR., JR.**

Mailing Address 217 WALNUT VALLEY DR.

City  
SPRINGFIELDState  
ILZip Code  
62707-8526FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654412

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

450.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. ALBRIGHT, CHARLES, E., MR., JR.**

Mailing Address 217 WALNUT VALLEY DR.

City  
SPRINGFIELDState  
ILZip Code  
62707-8526FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27678054

Amount of Each Receipt this Period

205.00

☐ Memo Item

CONTRIBUTION

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

**B. ALLAIS, DAVID, C., MR.,**

Mailing Address 14916 72ND AVE. W

City  
EDMONDSState  
WAZip Code  
98026-4009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707929

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

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

**C. ALLAR, VERNON, J., ,**

Mailing Address 519 N 61ST AVE. W

City  
DULUTHState  
MNZip Code  
55807-1921FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726679

Amount of Each Receipt this Period

150.00

☐ Memo Item

CONTRIBUTION

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

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

855.00

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

FOR LINE NUMBER: PAGE 11 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ALLEN, CHARLES LEE, , ,**

Mailing Address 345 LONGSHORE STREET #923

City  
CHARLESTONState  
SCZip Code  
29492-9002FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715723

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. ALLEN, DONALD, , ,**

Mailing Address 409 FOXFIRE CT

City  
JOPLINState  
MOZip Code  
64801-1631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KELLER WILLIAMS REALTY SW MOOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715730

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. AMEEN, TERESA, , ,**

Mailing Address 163 COMMODORE DR.

City  
JUPITERState  
FLZip Code  
33477-4007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722589

Amount of Each Receipt this Period

250.00

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

1250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. AMES, KEAGHAN, , ,**

Mailing Address 762 PARK ROAD NORTHWEST

City  
WASHINGTONState  
DCZip Code  
20010-1668FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BGR DCOccupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27706776

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. AMON, CARL, , MR.,**

Mailing Address PO BOX 1701

City  
JACKSONState  
WYZip Code  
83001-1701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671733

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. ANDERSON, ANITRA, , MRS.,**

Mailing Address 364 KINGS HWY

City  
NORTH HAVENState  
CTZip Code  
06473-1042FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27685183

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

750.00



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

FOR LINE NUMBER: PAGE 13 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ANDERSON, BRANDT, , ,**

Mailing Address 4013 FORT WORTH AVENUE

City  
ALEXANDRIAState  
VAZip Code  
22304-1712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BROWNSTEIN HYATT FABER SCHRECK, LLP

Occupation (for Individual)

SR POLICY ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27667530

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. ANDERSON, JANET, , MS.,**

Mailing Address 2905 MOCKINGBIRD TRL

City  
CASPERState  
WYZip Code  
82604-3641FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650702

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**C. ANDERSON, NOELLE, , ,**Mailing Address 2966 BRIGGS AVE  
APT 6FCity  
BRONXState  
NYZip Code  
10458-2040FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671842

Amount of Each Receipt this Period

350.00

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

885.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ANDERSON, WILLIAM, E., MR.,**

Mailing Address 400 BRITTANY CT

City  
AURORAState  
MOZip Code  
65605-6100FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650468

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

**B. ANNAST, MICHAEL, V., MR.,**

Mailing Address 2612 HIGHWAY 75

City  
HIAWASSEEState  
GAZip Code  
30546-1714FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27731270

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

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

**C. ARALE, ROBERT, , ,**

Mailing Address 140 PARKWAY DR.

City  
FREEHOLDState  
NJZip Code  
07728-5213FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654251

Amount of Each Receipt this Period

60.00

☐ Memo Item  
CONTRIBUTION

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

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

760.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. ARALE, ROBERT, , ,**

Mailing Address 140 PARKWAY DR.

City  
FREEHOLDState  
NJZip Code  
07728-5213FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707297

Amount of Each Receipt this Period

60.00

☐ Memo Item  
CONTRIBUTION

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

**B. ARALE, ROBERT, , ,**

Mailing Address 140 PARKWAY DR.

City  
FREEHOLDState  
NJZip Code  
07728-5213FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27723021

Amount of Each Receipt this Period

60.00

☐ Memo Item  
CONTRIBUTION

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

**C. ARCHER, DOROTHY, L., MS.,**

Mailing Address 6 DARBY HEATH

City  
FAIRFIELDState  
OHZip Code  
45014-5261FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671444

Amount of Each Receipt this Period

200.00

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

320.00

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

FOR LINE NUMBER: PAGE 16 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ARMONAS, DALIA, N., MRS.,**

Mailing Address 6765 N PALMERSTON DR

City  
MENTORState  
OHZip Code  
44060-3978FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.15

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721482

Amount of Each Receipt this Period

110.00

☐ Memo Item

CONTRIBUTION

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

**B. ARMSTRONG, WILLIAM, , MR.,**

Mailing Address 24939 RIDGE RD

City  
DAMASCUSState  
MDZip Code  
20872-1824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MACKINTOSH INC REALTORSOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748068

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

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

**C. ARNETT, DIANA, E., ,**

Mailing Address 14337 HILLSIDE LN

City  
WILLISState  
TXZip Code  
77318-4483FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727281

Amount of Each Receipt this Period

300.00

☐ Memo Item

CONTRIBUTION

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

910.00

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

FOR LINE NUMBER: PAGE 17 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ARNOTT, EVELYN, , ,**

Mailing Address 120 CHIEF EVAN

City  
FAIRBANKSState  
AKZip Code  
99709-4863FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GOLD STANDARD REAL ESTATEOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27748040**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. ASBERY, DAVID, , ,**

Mailing Address 15679 N. TURREL LANE

City  
MOUNT VERNONState  
ILZip Code  
62864-8608FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ASBERY AND ASSOCIATES OB GYNOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27741403**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

**C. AULICH, KENNETH, RICHARD, MR.,**

Mailing Address 705 VZ COUNTY ROAD 3211

City  
WILLS POINTState  
TXZip Code  
75169-7115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698943**

Amount of Each Receipt this Period

100.00

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

5600.00

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

FOR LINE NUMBER: PAGE 18 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BAILEY, BILLIE, , ,**

Mailing Address 18197 W GRACEMONT RD

City  
GRACEMONTState  
OKZip Code  
73042-9645FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657963

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**B. BAILEY, BILLIE, , ,**

Mailing Address 18197 W GRACEMONT RD

City  
GRACEMONTState  
OKZip Code  
73042-9645FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726438

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. BAILEY, BILLIE, , ,**

Mailing Address 18197 W GRACEMONT RD

City  
GRACEMONTState  
OKZip Code  
73042-9645FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727128

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BAILER, BRUCE, , ,**Mailing Address 38986 S SERENITY LN  
UNIT 22City  
TUCSONState  
AZZip Code  
85739-2142FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27731194

Amount of Each Receipt this Period

550.00

☐ Memo Item  
CONTRIBUTION

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

**B. BAISDEN, DEBORAH, , ,**

Mailing Address 3300 CHAPPELL PL

City  
VIRGINIA BEACHState  
VAZip Code  
23452-6290FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BERKSHIRE HATHAWAY HOMESERVICE RWOccupation (for Individual)  
LUXURY HOME SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748039

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. BAKER, LYLE, , ,**

Mailing Address 4568 E TUDOR RD

City  
BERRIEN SPRINGSState  
MIZip Code  
49103-9635FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICAN ELECTRIC POWEROccupation (for Individual)  
SENIOR REACTOR OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707244

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

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

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

1450.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BANE, JAMES, , ,**

Mailing Address 529 GALA AVE

City  
MOABState  
UTZip Code  
84532-2073FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27658298

Amount of Each Receipt this Period

245.00

☐ Memo Item  
CONTRIBUTION

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

**B. BANE, JAMES, , ,**

Mailing Address 529 GALA AVE

City  
MOABState  
UTZip Code  
84532-2073FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727031

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. BANKS, GARY, E., ,**

Mailing Address 1 OSPREY CT

City  
PIQUAState  
OHZip Code  
45356-4510FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653937

Amount of Each Receipt this Period

200.00

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

470.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BARGE, RICHARD, , MR.,**

Mailing Address P.O. BOX 72

City  
MACONState  
MSZip Code  
39341-0072FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27657559

Amount of Each Receipt this Period

400.00

☐ Memo Item

CONTRIBUTION

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

**B. BARKENBUSH, JOSEPH, A., MR.,**

Mailing Address 4310 N CAMINO ARCO

City  
TUCSONState  
AZZip Code  
85718-7017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650915

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

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

**C. BARNES, AMY, , ,**

Mailing Address 302 W DAME STREET

City  
LANARKState  
ILZip Code  
61046-1070FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BARNES REALTY, INC.

Occupation (for Individual)

REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715728

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

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

1150.00

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

FOR LINE NUMBER: PAGE 22 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BARNES, KURTH, H., MR.,**

Mailing Address 2720 E 4TH ST APT 321

City  
NATIONAL CITYState  
CAZip Code  
91950-3074FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.52

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27676145**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**B. BAUM, ALAN, C., ,**

Mailing Address 651 BERING DRIVE # 2001

City  
HOUSTONState  
TXZip Code  
77057-2136FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27695550**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. BAUM, FRANCES, , MRS.,**

Mailing Address 1037 110TH ST.

City  
ELGINState  
NEZip Code  
68636-4001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CATTLE FEEDING AND FARMING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27654086**

Amount of Each Receipt this Period

250.00

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

700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BAUMAN, LAWRENCE, , ,**

Mailing Address 4518 MOONLAKE RIDGE DRIVE

City  
CORPUS CHRISTIState  
TXZip Code  
78413-5017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COASTAL AG COOPOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707649

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

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

**B. BEAGLE, DEBRA, , ,**

Mailing Address 1109 BATEY DRIVE

City  
NASHVILLEState  
TNZip Code  
37204-4102FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE ASHTON REAL ESTATE GROUPOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748041

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. BEAN, RUTH ANN, , ,**

Mailing Address 1011 WOODLEAF COURT

City  
COLUMBIAState  
SCZip Code  
29212-0810FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27696188

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

610.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BEATTIE, WILLIAM, G., MR.,**

Mailing Address 11 ROCKWOOD LN

City  
DANBURYState  
CTZip Code  
06811-2718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRATEGIC MINERALSOccupation (for Individual)  
CHIEF EXECUTIVE OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654052

Amount of Each Receipt this Period

940.00

☐ Memo Item  
CONTRIBUTION

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

**B. BECCHI, ROSEMARY, , ,**

Mailing Address 37 HIGHLAND AVE.

City  
SHORT HILLSState  
NJZip Code  
07078-2809FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BHFSOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27671156

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. BELER, SAMUEL, K., MR.,**

Mailing Address 1672 FOOTHILL PARK CIR.

City  
LAFAYETTEState  
CAZip Code  
94549-2245FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650362

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

2440.00

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

FOR LINE NUMBER: PAGE 25 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BELL, ELIZABETH, A., MS.,**

Mailing Address 2421 AMARILLO DR

City  
O FALLONState  
MOZip Code  
63368-3575FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IPCOccupation (for Individual)  
MEDICAL ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.51

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676251

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

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

**B. BELL, WILLIAM, R., MR.,**

Mailing Address 7160 STATE HIGHWAY 140

City  
ATWATERState  
CAZip Code  
95301-9701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PET VETOccupation (for Individual)  
VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698860

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. BENTON, FREDERICK, G., , III**

Mailing Address 1065 ABERDEEN AVE

City  
BATON ROUGEState  
LAZip Code  
70808-3704FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676132

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

520.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BERG, HOWARD, L., DR.,**

Mailing Address 10 TEAL CT

City  
AMARILLOState  
TXZip Code  
79106-4002FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671589

Amount of Each Receipt this Period

395.00

☐ Memo Item  
CONTRIBUTION

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

**B. BERTA, SUSAN, , ,**

Mailing Address 2055 ROSEMONT AVENUE

City  
PASADENAState  
CAZip Code  
91103-1285FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647852

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. BERTOLUCCI, LAWRENCE, E., MR.,**

Mailing Address 272 SAVANNAH DR.

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-7903FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

503.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677180

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

695.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BHOJANI, ALI, , ,**

Mailing Address 140 SW 185TH WAY

City  
HOLLYWOODState  
FLZip Code  
33029-5470FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HG2Occupation (for Individual)  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27685332

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

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

**B. BIDEZ, TERESA, , ,**

Mailing Address P.O. BOX 937

City  
BLUE RIDGEState  
GAZip Code  
30513-0016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COLDWELL BANKER HIGH COUNTRYOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748074

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. BIEBER, ALBERT, , ,**

Mailing Address P.O. BOX 207

City  
CHINAState  
TXZip Code  
77613-0207FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671208

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

3500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BINGHAM, GLENN, S., MR.,**

Mailing Address 721 STEWARTS RD

City  
LANEXAState  
VAZip Code  
23089-8804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.90

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721652

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

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

**B. BINGHAM, GLENN, S., MR.,**

Mailing Address 721 STEWARTS RD

City  
LANEXAState  
VAZip Code  
23089-8804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.90

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726916

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

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

**C. BINGHAM, TODD, , ,**

Mailing Address 706 WINDSWEEP COURT

City  
GRAPEVINEState  
TXZip Code  
76051-5706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WILLOW REAL ESTATE, LLCOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748069

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

530.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BISHOP, LUTHER, A., MR.,**

Mailing Address 1102 CENTER ST

City  
MILFORDState  
OHZip Code  
45150-1327FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654466

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

**B. BITTINGER, REBECCA, , ,**

Mailing Address 429 HOOD ST.

City  
CHAMBERSBURGState  
PAZip Code  
17201-1142FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671281

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

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

**C. BITTINGER, REBECCA, , ,**

Mailing Address 429 HOOD ST.

City  
CHAMBERSBURGState  
PAZip Code  
17201-1142FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707234

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

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

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

185.00

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

FOR LINE NUMBER: PAGE 30 OF 6441

(check only one)

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

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

NAME OF COMMITTEE (In Full)

NRCC

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

**A. BITTLE, DARRELL, G., MR.,**

Mailing Address 614 OVERBROOK DR

City  
FORT WALTON BEACHState  
FLZip Code  
32547-3528FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647755

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. BITTLE, DARRELL, G., MR.,**

Mailing Address 614 OVERBROOK DR

City  
FORT WALTON BEACHState  
FLZip Code  
32547-3528FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677152

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. BITTLE, DARRELL, G., MR.,**

Mailing Address 614 OVERBROOK DR

City  
FORT WALTON BEACHState  
FLZip Code  
32547-3528FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27685280

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

150.00

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

FOR LINE NUMBER: PAGE 31 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BITTLE, DARRELL, G., MR.,**

Mailing Address 614 OVERBROOK DR

City  
FORT WALTON BEACHState  
FLZip Code  
32547-3528FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27702215

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. BITTLE, DARRELL, G., MR.,**

Mailing Address 614 OVERBROOK DR

City  
FORT WALTON BEACHState  
FLZip Code  
32547-3528FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726670

Amount of Each Receipt this Period

60.00

☐ Memo Item  
CONTRIBUTION

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

**C. BITTLE, DARRELL, G., MR.,**

Mailing Address 614 OVERBROOK DR

City  
FORT WALTON BEACHState  
FLZip Code  
32547-3528FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27731077

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

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

145.00

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

FOR LINE NUMBER: PAGE 32 OF 6441

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BITTLE, DARRELL, G., MR.,**

Mailing Address 614 OVERBROOK DR

City  
FORT WALTON BEACHState  
FLZip Code  
32547-3528FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27731378

Amount of Each Receipt this Period

60.00

☐ Memo Item

CONTRIBUTION

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

**B. BLUMSTEIN, JAMES, F., MR.,**

Mailing Address 2113 HAMPTON AVE

City  
NASHVILLEState  
TNZip Code  
37215-1401FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VANDERBILT UNIVERSITYOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707472

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

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

**C. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNEState  
ALZip Code  
35967-5145FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

343.05

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701790

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

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

320.00

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

FOR LINE NUMBER: PAGE 33 OF 6441

(check only one)

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

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

NAME OF COMMITTEE (In Full)

NRCC

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

**A. BOEKHOUD, HENDRIK, , ,**

Mailing Address 975 DE ROCA CT

City  
SPARKSState  
NVZip Code  
89434-9405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JUST REFINERS INCOccupation (for Individual)  
METALLURGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707756

Amount of Each Receipt this Period

160.00

☐ Memo Item  
CONTRIBUTION

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

**B. BOGGIO, JOHNNIE, F., MS.,**

Mailing Address 8755 CAMARGO RD

City  
CINCINNATIState  
OHZip Code  
45243-1411FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27648004

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**C. BOGGIO, JOHNNIE, F., MS.,**

Mailing Address 8755 CAMARGO RD

City  
CINCINNATIState  
OHZip Code  
45243-1411FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677707

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

410.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 34 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BOLES, MARY, ANN, MS.,**

Mailing Address PO BOX 10

City  
ARBUCKLEState  
CAZip Code  
95912-0010FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722750

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. BOLINGER, REBA, S., MS.,**

Mailing Address 543 W 6TH ST

City  
LITITZState  
PAZip Code  
17543-2408FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27699008

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. BONE, GARY, , ,**

Mailing Address 55 HEDGES RD

City  
ABILENEState  
TXZip Code  
79605-6514FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KW SYNERGYOccupation (for Individual)  
REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715734

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

800.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 35 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BOOTH, ELEANOR, W., MRS.,**

Mailing Address 525 E RIDGE VILLAGE DR.

City  
CUTLER BAYState  
FLZip Code  
33157-9112FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698854**

Amount of Each Receipt this Period

170.00

☐ Memo Item  
CONTRIBUTION

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

**B. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653947**

Amount of Each Receipt this Period

80.00

☐ Memo Item  
CONTRIBUTION

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

**C. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27719016**

Amount of Each Receipt this Period

50.00

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

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 36 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721635

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. BOSSET, ERIC, C., MR.,**

Mailing Address 125 DIAMOND SKY DR

City  
SEDONAState  
AZZip Code  
86351-7448FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650516

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**C. BOSSUYT, BARBARA, A., MS.,**Mailing Address 6017 E 6TH AVE  
APT M105City  
SPOKANE VALLEYState  
WAZip Code  
99212-0458FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

263.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676428

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

1100.00



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

FOR LINE NUMBER: PAGE 37 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BOWEN, BRUCE, EUGENE, ,**

Mailing Address 4406 SARONG DR

City  
HOUSTONState  
TXZip Code  
77096-4427FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727019

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. BOWLIN, GEORGIA, ANN, MS.,**

Mailing Address 27971 SUNLIGHT CT

City  
MURRIETAState  
CAZip Code  
92563-5069FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654182

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. BOWSER, ANDREW, , ,**

Mailing Address 1304 COUNTRY MEADOWS DR.

City  
BEDFORDState  
TXZip Code  
76021-3457FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TEAM GROUPOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727089

Amount of Each Receipt this Period

120.00

☐ Memo Item  
CONTRIBUTION

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

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

720.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 38 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BOZORGI, MANDAN, F., DR.,**

Mailing Address 1351 E WESTLEIGH RD

City  
LAKE FORESTState  
ILZip Code  
60045-3335FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MAGNA HEALTH SYSTEMSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650666**

Amount of Each Receipt this Period

220.00

☐ Memo Item  
CONTRIBUTION

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

**B. BRADFORD, ROBERT, L., MR.,**

Mailing Address 697 HEATHER WAY LANE

City  
THOMASVILLEState  
GAZip Code  
31757-1144FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL DIAGNOSTICSOccupation (for Individual)  
PHYSICIAN ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653650**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

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

**C. BRANDAU, GINNY, , MS.,**

Mailing Address 2100 RAINCREEK TRAIL

City  
HUNTSVILLEState  
ALZip Code  
35811-2602FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AVERBUCH REALTYOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27748067**

Amount of Each Receipt this Period

500.00

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

740.00

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

FOR LINE NUMBER: PAGE 39 OF 6441

(check only one)

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

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

NAME OF COMMITTEE (In Full)

NRCC

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

**A. BREWER, SHELBY, K., MRS.,**Mailing Address 5000 LAUNCH ST  
#124City  
GUNTERSVILLEState  
ALZip Code  
35976-2648FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.96

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27696312

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**B. BRITTINGHAM, TERESE, , ,**

Mailing Address 32 DONNY BROOK WAY

City  
COLLEGEVILLEState  
PAZip Code  
19426-4408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KELLER WILLIAMS REALTY GROUPOccupation (for Individual)  
BROKER OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748070

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. BROCK, KENNETH, , ,**

Mailing Address 408 N 9TH STREET

City  
NEW BADENState  
ILZip Code  
62265-1137FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

533.50

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681369

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

725.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 40 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BROCK, KENNETH, , ,**

Mailing Address 408 N 9TH STREET

City  
NEW BADENState  
ILZip Code  
62265-1137FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707947

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

**B. BROENEN, DARWIN, C., MR.,**Mailing Address 1211 S EADS ST  
APT 106City  
ARLINGTONState  
VAZip Code  
22202-2886FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27695501

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**C. BROENEN, DARWIN, C., MR.,**Mailing Address 1211 S EADS ST  
APT 106City  
ARLINGTONState  
VAZip Code  
22202-2886FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726684

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

375.00

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

FOR LINE NUMBER: PAGE 41 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BROOKHART, PATRICIA, F., MS.,**Mailing Address 514 LIMERICK CIR  
UNIT 301City  
LUTHVLE TIMONState  
MDZip Code  
21093-8187FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

974.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647777

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. BROOM, JOHN, , ,**

Mailing Address 3156 BRUNSWICK CIR

City  
PALM HARBORState  
FLZip Code  
34684-2305FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650309

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. BROTHERS, JUNE, SCOTT, ,**

Mailing Address 5210 RIVER RD N, APT 2027

City  
KEIZERState  
ORZip Code  
97303-4586FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.96

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701777

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

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

625.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 42 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BROTHERS, JUNE, SCOTT, ,**

Mailing Address 5210 RIVER RD N, APT 2027

City  
KEIZERState  
ORZip Code  
97303-4586FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.96

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727606

Amount of Each Receipt this Period

70.00

☐ Memo Item  
CONTRIBUTION

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

**B. BROUGHAM, WILLIAM, F., ,**

Mailing Address 12674 ROUTE 59

City  
SMETHPORTState  
PAZip Code  
16749-4036FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722692

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. BROUGHAM, WILLIAM, F., ,**

Mailing Address 12674 ROUTE 59

City  
SMETHPORTState  
PAZip Code  
16749-4036FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722988

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

220.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 43 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BROWN, CHARLES, W., MR.,**

Mailing Address 635 CONDER RD

City  
COPPERAS COVEState  
TXZip Code  
76522-7002FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671467

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

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

**B. BROWNING, CHERYL, , ,**

Mailing Address 401 BRINY AVENUE # 214

City  
POMPANO BEACHState  
FLZip Code  
33062-5826FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27706819

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

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

**C. BROWN, LINDA, S., ,**Mailing Address 8561 ANDERSON CREEK CIR  
APT 1204City  
DALLASState  
TXZip Code  
75243-1374FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

990.51

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721646

Amount of Each Receipt this Period

300.00

☐ Memo Item

CONTRIBUTION

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

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

540.00

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

FOR LINE NUMBER: PAGE 44 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27650664**

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

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

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27707706**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

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

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27741410**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

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

400.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 45 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BROWN, ROGER, D., ,**

Mailing Address 4609 MARBELLA CIR

City  
FORT WORTHState  
TXZip Code  
76126-1927FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

631.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741192

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. BRYANT, ANTHONY, W., MR.,**

Mailing Address 108 N BARSTOW ST.

City  
WAUKESHAState  
WIZip Code  
53186-4928FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTURY FENCE COOccupation (for Individual)  
BUSINESS EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727552

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

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

**C. BRYER, JOANNE, L., ,**

Mailing Address 1026 GROSVENOR DR.

City  
GREENVILLEState  
MIZip Code  
48838-3559FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27678121

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

2250.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 46 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

NRCC

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

**A. BRYER, JOANNE, L., ,**

Mailing Address 1026 GROSVENOR DR.

City  
GREENVILLEState  
MIZip Code  
48838-3559FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721682

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

**B. BUCHANAN, JAMES, F., MR.,**

Mailing Address 217 ROSEBUD AVE

City  
CORPUS CHRISTIState  
TXZip Code  
78404-1734FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WELDER LESHIN LLPOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27672210

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. BUDRAS, JOSEPH, , MR.,**

Mailing Address 3432 PUTNAM ST

City  
FALLS CHURCHState  
VAZip Code  
22042-3727FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

359.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27685084

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 47 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

NRCC

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

**A. BUDRAS, JOSEPH, , MR.,**

Mailing Address 3432 PUTNAM ST

City  
FALLS CHURCHState  
VAZip Code  
22042-3727FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698940

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. BURGERT, JANEAL, , ,**

Mailing Address 5 N 1600 W

City  
WEST POINTState  
UTZip Code  
84015-8061FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

626.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698841

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. BURNS, NANCY, , ,**

Mailing Address 497 GREENWICH ST. APT. 8B

City  
NEW YORKState  
NYZip Code  
10013-1314FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

308.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27657684

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 48 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. BUSSELL, BRUCE, , MR.,**

Mailing Address 4209 PETERBOROUGH ROAD

City  
WEST LAFAYETTEState  
INZip Code  
47906-5680FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.44

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721962

Amount of Each Receipt this Period

310.00

☐ Memo Item  
CONTRIBUTION

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

**B. CALDWELL, ROBERT, , ,**

Mailing Address 3655 CRAIGSHER DR

City  
APOPKAState  
FLZip Code  
32712-5861FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CALDWELL REALTY SERVICESOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748064

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. CAMBRIA, JOSEPH, , ,**

Mailing Address P.O. BOX 531

City  
BERNARDSVILLEState  
NJZip Code  
07924-0531FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741269

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

1310.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 49 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. CAMERO, RAYMOND, , ,**

Mailing Address 16652 CALLE JERMAINE

City  
PACIFIC PALISADESState  
CAZip Code  
90272-1938FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27699038

Amount of Each Receipt this Period

300.00

☐ Memo Item

CONTRIBUTION

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

**B. CANTEY, RICHARD, , MR.,**

Mailing Address 23782 CONTINENTAL DR

City  
CANYON LAKEState  
CAZip Code  
92587-7754FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676282

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

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

**C. CARLSON, GARY, T., MR.,**

Mailing Address 506 8TH ST SW

City  
JAMESTOWNState  
NDZip Code  
58401-4643FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27702193

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

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

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

600.00

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

FOR LINE NUMBER: PAGE 50 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. CARLSON, JAMES, A., MR.,**

Mailing Address 6506 LAMESE CT

City  
SPRINGFIELDState  
VAZip Code  
22152-2821FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650682

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. CARLSON, RICHARD, C., ,**

Mailing Address 51 E 216TH ST

City  
EUCLIDState  
OHZip Code  
44123-1153FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27695477

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. CARRUTHERS, ROGER, , ,**

Mailing Address 26024 W HORSHAM DR.

City  
BUCKEYEState  
AZZip Code  
85396-2061FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671660

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

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

750.00

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

FOR LINE NUMBER: PAGE 51 OF 6441

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CARTWRIGHT, RONALD, , ,**

Mailing Address PO BOX 206

City  
MEDICINE LAKEState  
MTZip Code  
59247-0206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27654265**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

**B. CASCARILLA, CHARLES, G., ,**

Mailing Address 2821 SOUTH BAYSHORE DRIVE

City  
MIAMIState  
FLZip Code  
33133-6019FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PAXOSOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27744265**

Amount of Each Receipt this Period

44300.00

☐ Memo Item  
CONTRIBUTION

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

**C. CASE, ROBERT, P., MR.,**

Mailing Address 13372 SANTA FE LINE RD

City  
WAPAKONETAState  
OHZip Code  
45895-8614FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SERVICEMASTER BY CASEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27722893**

Amount of Each Receipt this Period

250.00

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

44700.00

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

FOR LINE NUMBER: PAGE 52 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. CASEY, WILLIAM, , ,**

Mailing Address PO BOX 2294

City  
WOBURNState  
MAZip Code  
01888-0494FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707931

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

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

**B. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671521

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

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

**C. CHANG, JOHN, , ,**

Mailing Address 826 MELODY LN

City  
LYTLE CREEKState  
CAZip Code  
92358-9631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677734

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

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

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

800.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 53 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. CHERMAK, NANCY, , MRS.,**Mailing Address 7770 BURR ST  
APT 3417City  
SCHERERVILLEState  
INZip Code  
46375-0149FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27658124

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

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

**B. CHRISTENSEN, CHRISTIAN, M., MR.,**

Mailing Address 5707 BEVERLY ST

City  
SAVANNAHState  
GAZip Code  
31405-2821FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF CUISOccupation (for Individual)  
ENTOMOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27723151

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. CHU, THIEN, , ,**

Mailing Address 4156 W 163RD ST

City  
LAWNDALEState  
CAZip Code  
90260-3013FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681445

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 54 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. CICHANOWICZ, BRENDA, , ,**

Mailing Address 2220 DEPOT LN

City  
CUTCHOGUEState  
NYZip Code  
11935-1380FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741568

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

**B. CLAIBORNE, WALTER, , , III**

Mailing Address 14219 CLAIBORNE RD

City  
BATCHELORState  
LAZip Code  
70715-3514FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657792

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**C. CLAIBORNE, WALTER, , , III**

Mailing Address 14219 CLAIBORNE RD

City  
BATCHELORState  
LAZip Code  
70715-3514FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676729

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

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

700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 55 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. CLARKE, ROBERT, S., ,**

Mailing Address 2601 YOUNGDALE DRIVE

City  
LAS VEGASState  
NVZip Code  
89134-7874FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707053

Amount of Each Receipt this Period

205.00

☐ Memo Item  
CONTRIBUTION

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

**B. CLAYWELL, JAMES, , ,**

Mailing Address 8510 NE 433RD CIR

City  
WOODLANDState  
WAZip Code  
98674-2524FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654303

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

**C. CLOUGHLEY, LILLIAN, , ,**

Mailing Address 3009 W 48TH TER

City  
WESTWOODState  
KSZip Code  
66205-1658FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27695638

Amount of Each Receipt this Period

130.00

☐ Memo Item  
CONTRIBUTION

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

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

485.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 56 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. COHEN, DAVID, P., ,**

Mailing Address 9505 BROOKE DR.

City  
BETHESDAState  
MDZip Code  
20817-2207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BROWNSTEIN HYATT FARBER SCHRECKOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27667474

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

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

**B. COLE, MARYANNE, E., MS.,**

Mailing Address 131 TENBURY RD

City  
LUTHERVILLE TIMONIState  
MDZip Code  
21093-6340FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.08

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741536

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. COLLINS, GORMON, , MR.,**

Mailing Address 271 S FRONT AVE

City  
PRESTONSBURGState  
KYZip Code  
41653-7876FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WDOC INCOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726939

Amount of Each Receipt this Period

50.00

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

2575.00

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

FOR LINE NUMBER: PAGE 57 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. COLLINS, JOHNNY, , MR.,**

Mailing Address 108 TREMONT WAY

City  
MADISONState  
MSZip Code  
39110-4505FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CALVARY BAPTIST CHURCHOccupation (for Individual)  
PASTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681486**

Amount of Each Receipt this Period

210.00

☐ Memo Item  
CONTRIBUTION

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

**B. COLLINS, MELISSA, , ,**

Mailing Address 3675 SAVANNAH DR

City  
HARRISONState  
ARZip Code  
72601-9750FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WEICHERT, REALTORS-MARKET EDGEOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27748048**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. CONERTY, MICHAEL, ALAN, MR.,**

Mailing Address 2720 LINCOLN DR

City  
ARLINGTONState  
TXZip Code  
76006-3501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27677769**

Amount of Each Receipt this Period

250.00

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

960.00

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

FOR LINE NUMBER: PAGE 58 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CONNAUGHTON, SEAN, , ,**

Mailing Address 709 PRINCE ST

City  
ALEXANDRIAState  
VAZip Code  
22314-3004FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VIRGINIA HOSPITAL AND HEALTHCARE ASSOCOccupation (for Individual)  
PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661476**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

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

**B. CONNOLLY, CATHERINE, , ,**

Mailing Address 1146 PARK BLVD

City  
MASSAPEQUA PKState  
NYZip Code  
11762-2024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721812**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. CONNOLLY, CATHERINE, , ,**

Mailing Address 1146 PARK BLVD

City  
MASSAPEQUA PKState  
NYZip Code  
11762-2024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27722035**

Amount of Each Receipt this Period

200.00

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

10300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 59 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706882

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

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

**B. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707803

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

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

**C. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27730857

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

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

65.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 60 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. CORBETT, CORNELIA, G., MS.,**Mailing Address 509 GUI SANDO DE AVILA  
STE 201City  
TAMPAState  
FLZip Code  
33613-5235FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27695944

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**B. CORCORAN, MICHAEL, C., ,**

Mailing Address 7746 STILL LAKES DR

City  
ODESSAState  
FLZip Code  
33556-2260FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORCORAN PARTNERSOccupation (for Individual)  
GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27763558

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

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

**C. COSTELLO, DANIEL, , ,**

Mailing Address 69 WAVERLY AVE

City  
CLARENDON HILLSState  
ILZip Code  
60514-1236FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNIV OF NOTRE DAMEOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27702300

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

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

16300.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 61 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. COURTER, SALLY, H., ,**

Mailing Address 715 W MAMIE EISENHOWER AVE

City  
BOONEState  
IAZip Code  
50036-3930FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647941

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

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

**B. CRABILL, ROGER, D., ,**

Mailing Address 7575 W 300 S

City  
SOUTH WHITLEYState  
INZip Code  
46787-9108FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718925

Amount of Each Receipt this Period

210.00

☐ Memo Item

CONTRIBUTION

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

**C. CREMER, MICHAEL, A., DR.,**

Mailing Address 1482 HOLLOW FORK COVE

City  
GERMANTOWNState  
TNZip Code  
38138-1719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

785.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726444

Amount of Each Receipt this Period

264.00

☐ Memo Item

CONTRIBUTION

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

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

974.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 62 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. CRESS, WILLIAM, E., MR.,**Mailing Address 1304 REDBUD ST  
APT 202City  
YUKONState  
OKZip Code  
73099-5656FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27658038

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**B. CRESS, WILLIAM, E., MR.,**Mailing Address 1304 REDBUD ST  
APT 202City  
YUKONState  
OKZip Code  
73099-5656FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27658231

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. CROUCH, DENNIS, E., COL., USAF RET**

Mailing Address 3069 RANCHFIELD DR

City  
BEAVERCREEKState  
OHZip Code  
45432-2610FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27667837

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

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

125.00

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

FOR LINE NUMBER: PAGE 63 OF 6441

(check only one)

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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CROUCH, DENNIS, E., COL., USAF RET**

Mailing Address 3069 RANCHFIELD DR

City  
BEAVERCREEKState  
OHZip Code  
45432-2610FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27707052**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. CROWTHER, LAURA, , ,**

Mailing Address 45 GASPARILLA CIRCLE

City  
MURRELLS INLETState  
SCZip Code  
29576-4814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COASTAL CAROLINAS ASSOCIATION OF REALTOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27715716**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. CUKJATI, JOSEPH, F., MR.,**Mailing Address P.O. BOX 677  
STE 115City  
VENUSState  
TXZip Code  
76084-0677FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

985.74

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27741883**

Amount of Each Receipt this Period

100.00

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

700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 64 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. CUKJATI, JOSEPH, F., MR.,**Mailing Address P.O. BOX 677  
STE 115City  
VENUSState  
TXZip Code  
76084-0677FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

985.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741893

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. CULLEN, JAMES, C., MR.,**

Mailing Address 760 GLADE RD

City  
TITUSVILLEState  
FLZip Code  
32780-6452FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722184

Amount of Each Receipt this Period

70.00

☐ Memo Item  
CONTRIBUTION

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

**C. CUNNINGHAM, BEV, , ,**

Mailing Address 7341 VAN BUREN STREET

City  
VENTURAState  
CAZip Code  
93003-2557FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741369

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

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

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

190.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 65 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. CUNNINGHAM, BEV, , ,**

Mailing Address 7341 VAN BUREN STREET

City  
VENTURAState  
CAZip Code  
93003-2557FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741389

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

**B. CURRAN, WILLIAM, , ,**

Mailing Address 4601 HEY A1A

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

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654089

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. CURTIS, THOMAS, , ,**

Mailing Address 1319 E HILLSBORO BLVD

City  
DEERFIELD BEACHState  
FLZip Code  
33441-4237FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671950

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

425.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 66 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. CUTLIP, BEVERLY, JO, MISS,**

Mailing Address 105 CREEKVIEW LN.

City  
CANTONState  
GAZip Code  
30115-1123FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650697

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

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

**B. DACASIN, LEONARDO, L., MR.,**

Mailing Address 1578 4TH ST

City  
RICHMONDState  
CAZip Code  
94801-1603FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727380

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

**C. DACASIN, LEONARDO, L., MR.,**

Mailing Address 1578 4TH ST

City  
RICHMONDState  
CAZip Code  
94801-1603FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727576

Amount of Each Receipt this Period

145.00

☐ Memo Item  
CONTRIBUTION

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

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

695.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 67 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. DALIANES, ATHAN, H., MR.,**

Mailing Address 2040 SPRUCE WAY

City  
MEDFORDState  
ORZip Code  
97501-4209FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.76

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27651111

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

**B. DALIANES, ATHAN, H., MR.,**

Mailing Address 2040 SPRUCE WAY

City  
MEDFORDState  
ORZip Code  
97501-4209FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.76

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27723045

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. DALMAN, RONALD, , ,**

Mailing Address 701 RETREST DRIVE 137

City  
NAPLESState  
FLZip Code  
34110-FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.74

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726984

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

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

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

195.00

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

FOR LINE NUMBER: PAGE 68 OF 6441

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DAMASCENO, GRAZIA, , ,**

Mailing Address PO BOX 982

City  
POMPANO BEACHState  
FLZip Code  
33061-0982FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE INVESTMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731482**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

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

**B. DAMASCENO, NICK, , ,**

Mailing Address PO BOX 982

City  
POMPANO BEACHState  
FLZip Code  
33061-0982FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731483**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

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

**C. DANGERMOND, LAURA, , MRS.,**

Mailing Address PO BOX 7555

City  
REDLANDSState  
CAZip Code  
92375-0555FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ESRIOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27763571**

Amount of Each Receipt this Period

20000.00

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

24000.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 69 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. DANIEL, RALPH, , ,**

Mailing Address 138 OAKHURST TRAIL

City  
RIDGELANDState  
MSZip Code  
39157-8608FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27685175

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726992

Amount of Each Receipt this Period

105.00

☐ Memo Item  
CONTRIBUTION

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

**C. DAVIS, MARK, E., MR.,**

Mailing Address PO BOX 558

City  
SAINT PETERState  
MNZip Code  
56082-0558FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722240

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

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

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

1005.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 70 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. DEAN, CHRIS, , ,**

Mailing Address 6249 WILLOW HWY

City  
GRAND LEDGEState  
MIZip Code  
48837-8982FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GATEWAY TO HOMESOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715720

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681520

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. DECHERT, ALLAN, , ,**

Mailing Address 56 W 16TH ST

City  
AVALONState  
NJZip Code  
08202-2339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FERGUSON DECHERT REAL ESTATEOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748055

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

1100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 71 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. DEGROOT, PAUL, , ,**

Mailing Address 1S500 FAIRVIEW AVE

City  
LOMBARDState  
ILZip Code  
60148-5017FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1548.85

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671914

Amount of Each Receipt this Period

490.00

☐ Memo Item  
CONTRIBUTION

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

**B. DEGROOT, PAUL, , ,**

Mailing Address 1S500 FAIRVIEW AVE

City  
LOMBARDState  
ILZip Code  
60148-5017FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1548.85

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27723318

Amount of Each Receipt this Period

490.00

☐ Memo Item  
CONTRIBUTION

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

**C. DELEHANTY, CHERYL, , ,**

Mailing Address 930 TAHOE BLVD 802-210

City  
INCLINE VILLAGEState  
NVZip Code  
89451-9451FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COLDWELL BANKER SELECTOccupation (for Individual)  
REAL ESTATE SALESPERSON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715729

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

1480.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 72 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. DEMPSEY, LEAH, , ,**

Mailing Address 209 11TH STREET NE

City  
WASHINGTONState  
DCZip Code  
20002-6217FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BROWNSTEIN HYATT FARBER AND SCHRECK

Occupation (for Individual)

SHAREHOLDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27675901

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. DENHOFF, DIANE, K., ,**

Mailing Address 1908 STATE ROUTE 19

City  
WELLSVILLEState  
NYZip Code  
14895-9740FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681324

Amount of Each Receipt this Period

1.00

☐ Memo Item  
CONTRIBUTION

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

**C. DENHOFF, DIANE, K., ,**

Mailing Address 1908 STATE ROUTE 19

City  
WELLSVILLEState  
NYZip Code  
14895-9740FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726953

Amount of Each Receipt this Period

1.00

☐ Memo Item  
CONTRIBUTION

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

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

502.00

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

FOR LINE NUMBER: PAGE 73 OF 6441

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DESSAUER, MARILYNN, , ,**

Mailing Address 8679 BLUE FLAG WAY

City  
NAPLESState  
FLZip Code  
34109-4300FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.61

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27682048

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**B. DEYARMAN, GERALDINE, M., ,**

Mailing Address 2543 GRADWOHL RD

City  
TOLEDOState  
OHZip Code  
43617-1808FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.08

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27708086

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. DIDOMINICIS, JUDITH, A., ,**

Mailing Address 224E SPRINGMEADOW DR.

City  
HOLBROOKState  
NYZip Code  
11741-4129FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27702196

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

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

110.00

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

FOR LINE NUMBER: PAGE 74 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DIFRANCO, GERALDINE, A., ,**

Mailing Address 1801 GULF SHORE BLVD N

City  
NAPLESState  
FLZip Code  
34102-4915FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PERIODONTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741539

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. DILL, JOHN, C., MR.,**

Mailing Address 2401 MAPLE RIDGE DRIVE

City  
TUSCALOOSAState  
ALZip Code  
35406-1838FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

834.50

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677626

Amount of Each Receipt this Period

160.00

☐ Memo Item  
CONTRIBUTION

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

**C. DILL, JOHN, C., MR.,**

Mailing Address 2401 MAPLE RIDGE DRIVE

City  
TUSCALOOSAState  
ALZip Code  
35406-1838FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

834.50

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698867

Amount of Each Receipt this Period

100.00

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

760.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 75 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. DILL, JOHN, C., MR.,**

Mailing Address 2401 MAPLE RIDGE DRIVE

City  
TUSCALOOSAState  
ALZip Code  
35406-1838FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

834.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707946

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. DILL, MARY, , ,**

Mailing Address 35 SAN MARINO DR.

City  
SAN RAFAELState  
CAZip Code  
94901-1535FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654076

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. DIMMLING, LESLIE, J., MS.,**

Mailing Address 80 KINGSBURY RD

City  
GARDEN CITYState  
NYZip Code  
11530-3138FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653846

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

650.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 76 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DITWILER, BOB, , ,**

Mailing Address 7650 BAYSHORE DR. APT. 1104

City  
TREASURE ISLANDState  
FLZip Code  
33706-3542FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27708127**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. DONNELL, JAMES, , ,**

Mailing Address 603 SAN ANTONIO BLVD.

City  
HOUMAState  
LAZip Code  
70360-6251FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671192**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

**C. DONNELL, JAMES, , ,**

Mailing Address 603 SAN ANTONIO BLVD.

City  
HOUMAState  
LAZip Code  
70360-6251FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27731398**

Amount of Each Receipt this Period

400.00

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

1200.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 77 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DONOVAN, RYAN, , ,**

Mailing Address 10904 FOX SPARROW CT

City  
FAIRFAXState  
VAZip Code  
22032-3141FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COUNCIL OF FEDERAL HOME LOAN BANKSOccupation (for Individual)  
PRESIDENT AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27653703**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**B. DOOLEY, JEFFREY, I., ,**

Mailing Address 15685 LA MAR CT

City  
MORGAN HILLState  
CAZip Code  
95037-5682FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698922**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. DOORNBOS, BILLY, , ,**

Mailing Address 1003 DOORNBOS LN

City  
NEDERLANDState  
TXZip Code  
77627-2551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
C DOORNBOS INCOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721958**

Amount of Each Receipt this Period

250.00

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

1275.00

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

FOR LINE NUMBER: PAGE 78 OF 6441

(check only one)

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

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

NAME OF COMMITTEE (In Full)

NRCC

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

**A. DUGAS, ROLAND, , MR.,**

Mailing Address 408 ELYSIAN FIELDS DR

City  
LAFAYETTEState  
LAZip Code  
70508-6058FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.87

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27653914

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

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

**B. DUKES, MARIAN, , MISS,**

Mailing Address 5663 W ARROWHEAD LAKES DR.

City  
GLENDALEState  
AZZip Code  
85308-6216FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.16

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27722604

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

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

**C. DUNCAN, PEGGY, , ,**

Mailing Address 327 S. GLENWOOD DRIVE

City  
EL CENTROState  
CAZip Code  
92243-5557FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27723282

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

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

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

230.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 79 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DUNLAY, MARK, J., MR.,**

Mailing Address 4218 SAWGRASS DR.

City  
NORTH CHARLESTONState  
SCZip Code  
29420-7511FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27677266**

Amount of Each Receipt this Period

350.00

☐ Memo Item  
CONTRIBUTION

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

**B. DUNN, WILLIAM, , ,**

Mailing Address 1982 HAWKS NEST DR

City  
PORT ORANGEState  
FLZip Code  
32128-7381FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27667528**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

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

**C. DUTCHER, MICHAEL, A., MR.,**

Mailing Address 6628 TANGLEWOOD RD

City  
SAN DIEGOState  
CAZip Code  
92111-4146FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

383.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681502**

Amount of Each Receipt this Period

50.00

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

2400.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 80 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DUTCHER, MICHAEL, A., MR.,**

Mailing Address 6628 TANGLEWOOD RD

City  
SAN DIEGOState  
CAZip Code  
92111-4146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707872

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. EBERHARD, NEIL, EMERY, MR.,**

Mailing Address 9246 YOLANDA AVE

City  
NORTHRIDGEState  
CAZip Code  
91324-3141FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707331

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. EBERHARDT, RICH, , ,**

Mailing Address 6006 104TH ST

City  
LUBBOCKState  
TXZip Code  
79424-8295FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RE/MAX LUBBOCKOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715722

Amount of Each Receipt this Period

500.00

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

1050.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 81 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. EDWARDS, BREEYAN, , ,**

Mailing Address 523 ST. VRAIN LANE

City  
ESTES PARKState  
COZip Code  
80517-7489FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BROKER/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748044

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. EDWARDS, DALE, , MR.,**

Mailing Address 124 SE SANDSTONE DR.

City  
BLUE SPRINGSState  
MOZip Code  
64014-3812FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27657563

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. EEK, ELISABETH, G., MRS.,**

Mailing Address 2608 VIKING DR

City  
HERNDONState  
VAZip Code  
20171-2421FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677214

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

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

725.00

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

FOR LINE NUMBER: PAGE 82 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. EEK, ELISABETH, G., MRS.,**

Mailing Address 2608 VIKING DR

City  
HERNDONState  
VAZip Code  
20171-2421FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741273

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. EHRlich, ANDREW, , ,**

Mailing Address 1304 ELLISON STREET

City  
FALLS CHURCHState  
VAZip Code  
22046-4619FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27650272

Amount of Each Receipt this Period

1250.00

☐ Memo Item  
CONTRIBUTION

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

**C. ELDER, STEPHEN, J., MR.,**

Mailing Address 11 FOREST GLEN LN SW

City  
LAKEWOODState  
WAZip Code  
98498-5306FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27708029

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

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

1500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 83 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. ELKINS, RONALD, J., MR.,**

Mailing Address 5864 PORTSMOUTH ST

City  
CHINOState  
CAZip Code  
91710-2647FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27716051

Amount of Each Receipt this Period

700.00

☐ Memo Item  
CONTRIBUTION

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

**B. ELLIS, ALVIN, A., MR., SR.**

Mailing Address 18 ELLIS LN.

City  
RED LODGEState  
MTZip Code  
59068-9647FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681975

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

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

**C. ELMORE, GEORGE, , ,**

Mailing Address 121 OAK CIRCLE

City  
PINE MOUNTAINState  
GAZip Code  
31822-8301FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701804

Amount of Each Receipt this Period

315.00

☐ Memo Item  
CONTRIBUTION

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

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

3015.00

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

FOR LINE NUMBER: PAGE 84 OF 6441

(check only one)

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

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

NAME OF COMMITTEE (In Full)

NRCC

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

**A. ENGELBRECHT, KATHLEEN, , ,**

Mailing Address 11644 SUMMERHAVEN DR

City  
SAINT LOUISState  
MOZip Code  
63146-5442FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647998

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. ENGEL, SCOTT, , ,**

Mailing Address 4601 LAFAYETTE AVENUE

City  
FORT WORTHState  
TXZip Code  
76107-3721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

STEWART PLLC

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706993

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. ERICSON, TONI, M., ,**

Mailing Address 779 MCCURDY RD

City  
WHITE HOUSEState  
TNZip Code  
37188-9038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722578

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

750.00



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

FOR LINE NUMBER: PAGE 85 OF 6441

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. FAHEY, JOHN, P., MR.,**

Mailing Address 286 BROAD ST.

City  
WEYMOUTHState  
MAZip Code  
02188-3511FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27651091

Amount of Each Receipt this Period

300.00

☐ Memo Item

CONTRIBUTION

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

**B. FANNIN, SUZAN, , MS.,**

Mailing Address 5903 85TH ST

City  
LUBBOCKState  
TXZip Code  
79424-3602FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.66

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27657489

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

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

**C. FARR HARRISON, NATALIE, , ,**

Mailing Address 414 TYLER PLACE

City  
ALEXANDRIAState  
VAZip Code  
22302-3309FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

AVOQ - FORMERLY SUBJECT MATTER

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27718874

Amount of Each Receipt this Period

750.00

☐ Memo Item

CONTRIBUTION

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

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

1150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 86 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

NRCC

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

**A. FAST, MARTIN, , ,**

Mailing Address 1559 FRAZER RD N

City  
FRAZERState  
MTZip Code  
59225-9651FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727595

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

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

**B. FELDER, EMILY, , ,**

Mailing Address 14 W CATON AVE

City

ALEXANDRIA

State

VA

Zip Code

22301-1520

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BROWNSTEIN HYATT FABER SCHRECK, LLP

Occupation (for Individual)

SENIOR POLICY ADVISOR AND COU

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27671148

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

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

**C. FEMRITE, ELWOOD, L., MR.,**

Mailing Address 1765 HEMLOCK ST

City

FAIRFIELD

State

CA

Zip Code

94533-3767

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RET

Occupation (for Individual)

RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27667833

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

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

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

800.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 87 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. FEMRITE, ELWOOD, L., MR.,**

Mailing Address 1765 HEMLOCK ST

City  
FAIRFIELDState  
CAZip Code  
94533-3767FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27667958

Amount of Each Receipt this Period

65.00

☐ Memo Item  
CONTRIBUTION

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

**B. FEMRITE, ELWOOD, L., MR.,**

Mailing Address 1765 HEMLOCK ST

City  
FAIRFIELDState  
CAZip Code  
94533-3767FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671168

Amount of Each Receipt this Period

65.00

☐ Memo Item  
CONTRIBUTION

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

**C. FEMRITE, ELWOOD, L., MR.,**

Mailing Address 1765 HEMLOCK ST

City  
FAIRFIELDState  
CAZip Code  
94533-3767FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707897

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

180.00

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

FOR LINE NUMBER: PAGE 88 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. FERGUSON, WILLIAM, JOHN, MR.,**

Mailing Address 286 HIBBING CIR

City  
MARINAState  
CAZip Code  
93933-3552FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MPVSDOccupation (for Individual)  
CUSTODIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.71

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27658067

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. FERGUSON, WILLIAM, JOHN, MR.,**

Mailing Address 286 HIBBING CIR

City  
MARINAState  
CAZip Code  
93933-3552FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MPVSDOccupation (for Individual)  
CUSTODIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.71

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

Transaction ID : SA11A.27685282

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

**C. FIELDS, KENNETH, H., MR.,**

Mailing Address 10 TOBOGGAN RIDGE RD

City  
SADDLE RIVERState  
NJZip Code  
07458-2520FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KLINGENSTEIN FIELDS AND CO LPOccupation (for Individual)  
INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27727585

Amount of Each Receipt this Period

250.00

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

375.00

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

FOR LINE NUMBER: PAGE 89 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. FINDLEY, DAVID, E., MR.,**

Mailing Address 5403 TOURAINE DR.

City  
TALLAHASSEEState  
FLZip Code  
32308-5942FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707409

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. FINDLAY, PEGGIE, A., DR.,**

Mailing Address 5314 EAKES ROAD NW

City  
LOS RANCHOSState  
NMZip Code  
87107-5534FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653732

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. FINN, PATRICK, , MR., JR.**Mailing Address 15705 LARIMORE PLZ  
APT 2City  
OMAHAState  
NEZip Code  
68116-8801FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

273.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677070

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 90 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

NRCC

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

**A. FINN, PATRICK, , MR., JR.**Mailing Address 15705 LARIMORE PLZ  
APT 2City  
OMAHAState  
NEZip Code  
68116-8801FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.2772525

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. FISH, LORNA, M., MRS.,**

Mailing Address 3 W PICKERING BND

City

RICHBORO

State

PA

Zip Code

18954-1540

FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650529

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. FISHER, CLAUDIA, , MS.,**

Mailing Address 1125 LANE 9

City

POWELL

State

WY

Zip Code

82435-9306

FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647802

Amount of Each Receipt this Period

270.00

☐ Memo Item  
CONTRIBUTION

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

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

570.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 91 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFFState  
AZZip Code  
86005-8967FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27658130

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

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

**B. FLAKES, YUN, , ,**

Mailing Address 1588 HEPHZIBAH - MCBEAN ROAD

City  
HEPHZIBAHState  
GAZip Code  
30815-4324FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726344

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. FLUCHT, MOZELLA, , ,**

Mailing Address 136 CHEROKEE DR.

City  
MAUMELLEState  
ARZip Code  
72113-7402FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650647

Amount of Each Receipt this Period

200.00

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

720.00

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

FOR LINE NUMBER: PAGE 92 OF 6441

(check only one)

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

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

NAME OF COMMITTEE (In Full)

NRCC

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

**A. FLUCHT, MOZELLA, , ,**

Mailing Address 136 CHEROKEE DR.

City  
MAUMELLEState  
ARZip Code  
72113-7402FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27695937

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. FOLLANSBEE, JEFFREY, , ,**

Mailing Address 3120 WEDGEWOOD DR

City  
COLGATEState  
WIZip Code  
53017-9570FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ASCENSIONOccupation (for Individual)  
MEDICINE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721839

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. FORD, JOHN, E., MR.,**

Mailing Address 2250 HEARST WILLITS RD

City  
WILLITSState  
CAZip Code  
95490-8705FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727332

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

600.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 93 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. FORT, BRENDA, , ,**

Mailing Address 3572 ALDER PL

City  
CHINO HILLSState  
CAZip Code  
91709-2007FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676177

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

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

**B. FOSTER, ROBERT, , ,**

Mailing Address 4356 E AMUR LN

City  
POST FALLSState  
IDZip Code  
83854-7566FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27723026

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. FOUTCH, BETH, , ,**

Mailing Address 2073 CAGES BEND ROAD

City  
GALLATINState  
TNZip Code  
37066-5812FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RE/MAX CHOICE PROPERTIESOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748058

Amount of Each Receipt this Period

500.00

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

545.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 94 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. FOWLER, THOMAS, RICHARD, MR.,**

Mailing Address 2708 ELM AVE

City  
MANHATTAN BEACHState  
CAZip Code  
90266-2426FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647855

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. FRAKER, DEAN, A., MR.,**

Mailing Address 1295 W COOK RD

City  
MANSFIELDState  
OHZip Code  
44906-3547FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701756

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

**C. FRAKER, DEAN, A., MR.,**

Mailing Address 1295 W COOK RD

City  
MANSFIELDState  
OHZip Code  
44906-3547FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741368

Amount of Each Receipt this Period

225.00

☐ Memo Item  
CONTRIBUTION

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

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

800.00

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

FOR LINE NUMBER: PAGE 95 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. FRANCE, SHERROD, W., MR.,**

Mailing Address PO BOX 607

City  
RAWLINSState  
WYZip Code  
82301-0607FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

977.87

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676796

Amount of Each Receipt this Period

425.00

☐ Memo Item  
CONTRIBUTION

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

**B. FRANK, DENNIS, , ,**

Mailing Address 2701 HENDRIX DR.

City  
BLOOMINGTONState  
ILZip Code  
61704-5627FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27693266

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. FREDENBURG, CAROL, , ,**

Mailing Address 10924 RIVER PLANTATION DR.

City  
AUSTINState  
TXZip Code  
78747-1495FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.84

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654460

Amount of Each Receipt this Period

55.00

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

730.00

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

FOR LINE NUMBER: PAGE 96 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. FREDENBURG, CAROL, , ,**

Mailing Address 10924 RIVER PLANTATION DR.

City  
AUSTINState  
TXZip Code  
78747-1495FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.84

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27658047

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

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

**B. FREEBORN, JOANN, L., MRS.,**Mailing Address 1904 N 240TH RD  
P.O. BOX 307City  
CONCORDIAState  
KSZip Code  
66901-6825FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27731119

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. FREEBERG, MILDRED, , MRS.,**

Mailing Address 3519 LAUNCELOT WAY

City  
ANNANDALEState  
VAZip Code  
22003-1359FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27685081

Amount of Each Receipt this Period

50.00

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

355.00

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

FOR LINE NUMBER: PAGE 97 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. FREEMAN, WENDELL, B., MR.,**

Mailing Address 408 WOODLEY WAY

City  
SANTA ROSAState  
CAZip Code  
95409-6402FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647954

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. FRESHWATER, KIM, , ,**

Mailing Address 105 GLENWOOD DR

City  
JACKSONState  
GAZip Code  
30233-5336FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTURY 21 CROWE REALTYOccupation (for Individual)  
REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748072

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. FUCIK, JOHN, , ,**

Mailing Address 3110 TAMARISK DRIVE

City  
RENOState  
NVZip Code  
89502-9743FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

309.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741680

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 98 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. FULLER, JOHN, D., MR.,**

Mailing Address 279 TOURNAMENT LN.

City  
FREEPORTState  
FLZip Code  
32439-6241FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677404

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. FULLER, WINSTON, R., MR., JR.**

Mailing Address 314 BUENA VISTA

City  
NEWPORT BEACHState  
CAZip Code  
92661-1125FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654258

Amount of Each Receipt this Period

370.00

☐ Memo Item  
CONTRIBUTION

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

**C. FURTNEY, PAM, SUE, MS.,**

Mailing Address 130 TWEED DR.

City  
JACKSONVILLEState  
NCZip Code  
28540-4589FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTURY 21 CHAMPION REAL ESTATEOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715717

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

920.00

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

FOR LINE NUMBER: PAGE 99 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. GAGNON, ARLINE, M., MS.,**

Mailing Address 1034 MAPLECHASE DR. SE

City  
LELANDState  
NCZip Code  
28451-9515FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.88

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27654143**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**B. GAGNON, DENIS, , MR.,**

Mailing Address 9 STONINGTON DR

City  
WILBRAHAMState  
MAZip Code  
01095-2336FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27722143**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. GALLEY, HERMANN, JOHANNES, ,**

Mailing Address 435 W 57TH ST APT 9F

City  
NEW YORKState  
NYZip Code  
10019-1736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27741278**

Amount of Each Receipt this Period

5000.00

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

5450.00

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

FOR LINE NUMBER: PAGE 100 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. GARDNER, LLOYD, , MR.,**

Mailing Address 27552 HARBOR BLUFF

City  
DAPHNEState  
ALZip Code  
36526-4749FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27657504

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

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

**B. GARNER, BARBARA, , ,**Mailing Address 3152 GRACEFIELD ROAD  
APT. # 102City  
SILVER SPRINGState  
MDZip Code  
20904-5898FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726980

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. GASHENKO, LUDA, V., MS.,**

Mailing Address 5401 OLD SEWARD HIGHWAY

City  
ANCHORAGEState  
AKZip Code  
99518-1458FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.43

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710437

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

550.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 101 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. GAYNOR, RONALD, , ,**

Mailing Address 3277 SPARTINA AVE

City  
MERRITT ISLANDState  
FLZip Code  
32953-8232FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27723004

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. GEIGER, BARBARA, , ,**

Mailing Address 5417 E FREIESS DR.

City  
SCOTTSDALEState  
AZZip Code  
85254-2963FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647935

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

**C. GEPHART, JOE, P., MR.,**

Mailing Address 1507 WINDSOR DR.

City  
FRIENDSWOODState  
TXZip Code  
77546-4782FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718893

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

650.00

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

FOR LINE NUMBER: PAGE 102 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. GERRY, EDWARD, T., ,**

Mailing Address 23 HARRASEEKET RD

City  
SOUTH FREEPORTState  
MEZip Code  
04078-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701784

Amount of Each Receipt this Period

600.00

☐ Memo Item

CONTRIBUTION

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

**B. GHAZIL, JAMES, A., DR.,**

Mailing Address 3028 JAMACHA VIEW DR

City  
EL CAJONState  
CAZip Code  
92019-5135FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681452

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

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

**C. GHAZIL, JAMES, A., DR.,**

Mailing Address 3028 JAMACHA VIEW DR

City  
EL CAJONState  
CAZip Code  
92019-5135FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721605

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

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

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

685.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 103 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. GHEBREMEDHIN, BERHANE, , ,**

Mailing Address 1520 DOVE CY

City  
PASADENAState  
CAZip Code  
91107-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DPSS LA COUNTYOccupation (for Individual)  
ELIGIBILITY SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1270.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681493

Amount of Each Receipt this Period

145.00

☐ Memo Item  
CONTRIBUTION

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

**B. GILBERT, JOHN, , ,**

Mailing Address 2807 HOLLYPOINT CT

City  
ARLINGTONState  
TXZip Code  
76015-2283FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701811

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. GILFILLAN, RICHARD, M., MR.,**

Mailing Address 723 S FAIR ST

City  
WELLINGTONState  
KSZip Code  
67152-2027FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707619

Amount of Each Receipt this Period

250.00

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

645.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 104 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. GILLAR, MARY, E., MS., TTEE**

Mailing Address 11400 MAHA LOOP RD.

City  
AUSTINState  
TXZip Code  
78719-9774FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681626

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

**B. GILMARTIN, GLADYS, , ,**

Mailing Address 7739 SE LOBLOLLY BAY DR.

City  
HOBE SOUNDState  
FLZip Code  
33455-3830FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654148

Amount of Each Receipt this Period

2250.00

☐ Memo Item  
CONTRIBUTION

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

**C. GILMARTIN, RAYMOND, , ,**

Mailing Address 7739 SE LOBLOLLY BAY DRIVE

City  
HOBE SOUNDState  
FLZip Code  
33455-3830FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654149

Amount of Each Receipt this Period

2250.00

☐ Memo Item  
CONTRIBUTION

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

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

4650.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 105 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

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

**A. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681441

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

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

**B. GLASS, LORETTA, M., ,**

Mailing Address 172 DOGWOOD LN

City  
BEAN STATIONState  
TNZip Code  
37708-4264FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704602

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. GODDARD, RANDALL, J., MR.,**

Mailing Address 19767 N 1800TH AVE

City  
ATKINSONState  
ILZip Code  
61235-9663FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654376

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

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

715.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 106 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. GODDARD, RANDALL, J., MR.,**

Mailing Address 19767 N 1800TH AVE

City  
ATKINSONState  
ILZip Code  
61235-9663FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676823

Amount of Each Receipt this Period

155.00

☐ Memo Item  
CONTRIBUTION

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

**B. GODDARD, RANDALL, J., MR.,**

Mailing Address 19767 N 1800TH AVE

City  
ATKINSONState  
ILZip Code  
61235-9663FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718958

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. GOLDFARB, LAURENCE, , ,**

Mailing Address 9545 LABELLE COURT

City  
DELRAY BEACHState  
FLZip Code  
33446-3680FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LAURAND ASSOCIATESOccupation (for Individual)  
COMMODITIES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27715711

Amount of Each Receipt this Period

4000.00

☐ Memo Item  
CONTRIBUTION

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

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

4255.00

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

FOR LINE NUMBER: PAGE 107 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. GOLDMAN, MARC, S., MR.,**Mailing Address 800 SOUTH OCEAN BOULEVARD  
204City  
BOCA RATONState  
FLZip Code  
33432-6364FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27698605**

Amount of Each Receipt this Period

4000.00

☐ Memo Item  
CONTRIBUTION

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

**B. GOODWIN, DONALD, , ,**

Mailing Address 16492 SOMERSET LN

City  
HUNTINGTON BEACHState  
CAZip Code  
92649-2835FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27722164**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

**C. GOOL, HEATHER, , ,**

Mailing Address 2128 HIGH HOUSE RD, STE 100

City  
CARYState  
NCZip Code  
27519-8444FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COLDWELL BANKER ADVANTAGEOccupation (for Individual)  
REGIONAL VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27715726**

Amount of Each Receipt this Period

500.00

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

4800.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 108 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. GORDON, DAVID, , MR.,**

Mailing Address 8439 153RD AVE APT 4D

City  
HOWARD BEACHState  
NYZip Code  
11414-1937FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698897

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

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

**B. GOTCHER, GAYLE, , MS.,**

Mailing Address 8846 W 143RD TER

City  
OVERLAND PARKState  
KSZip Code  
66221-9506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650294

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

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

**C. GOTTLIEB, STEPHEN, , ,**

Mailing Address 705 CORELLI COVE ST

City  
HENDERSONState  
NVZip Code  
89011-5523FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

346.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707989

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

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

500.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 109 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. GRAHAM, RONALD, E., DR.,**

Mailing Address 2104 PELL ST.

City  
SCOTTSBOROState  
ALZip Code  
35769-3940FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653906**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. GRAHAM, VICTORIA, , ,**

Mailing Address 2083 UPLAND ST.

City  
RCH PALOS VRDState  
CAZip Code  
90275-1121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706929**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. GREEN, JO-MARIE, , ,**

Mailing Address 8026 PARK OVERLOOK DRIVE

City  
BETHESDAState  
MDZip Code  
20817-2724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
W. R. BERKLEY CORPORATIONOccupation (for Individual)  
FEDERAL GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27715737**

Amount of Each Receipt this Period

2500.00

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

2700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 110 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. GREENLUND, LISA, , ,**

Mailing Address 22 GLENGATE CT

City  
BEL AIRState  
MDZip Code  
21014-5683FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726368

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. GREEN, MITZI, K., MS.,**

Mailing Address 711 N 20TH ST

City  
LAMESAState  
TXZip Code  
79331-2523FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726531

Amount of Each Receipt this Period

125.00

☐ Memo Item  
CONTRIBUTION

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

**C. GREGORY, BEVERLY, , MS.,**

Mailing Address 805 FOX RIDGE LN

City  
WILMINGTONState  
NCZip Code  
28405-5259FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647885

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

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

375.00

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

FOR LINE NUMBER: PAGE 111 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. GREGORY, BEVERLY, , MS.,**

Mailing Address 805 FOX RIDGE LN

City  
WILMINGTONState  
NCZip Code  
28405-5259FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707727

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

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

**B. GREGORY, DONALD, , ,**Mailing Address 100 THORNDALD DR.  
APT 202City  
SAN RAFAELState  
CAZip Code  
94903-4556FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647953

Amount of Each Receipt this Period

150.00

☐ Memo Item

CONTRIBUTION

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

**C. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681524

Amount of Each Receipt this Period

45.00

☐ Memo Item

CONTRIBUTION

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

245.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 112 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. GRITMAN, JOHN, , ,**

Mailing Address 22631 BIG OAK DR

City  
ATHENSState  
ALZip Code  
35613-6069FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27707040**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. GRUENDEL, LIZ, , ,**

Mailing Address 460 COUNTY ROAD 5170

City  
SALEMState  
MOZip Code  
65560-7302FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1090.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27677793**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. GUDAT, RICHARD, C., ,**

Mailing Address 8 APPLE HILL LN

City  
YORKState  
PAZip Code  
17402-9372FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27654459**

Amount of Each Receipt this Period

85.00

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

235.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 113 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. GUDAT, RICHARD, C., ,**

Mailing Address 8 APPLE HILL LN

City  
YORKState  
PAZip Code  
17402-9372FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657950

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**B. GUDAT, RICHARD, C., ,**

Mailing Address 8 APPLE HILL LN

City  
YORKState  
PAZip Code  
17402-9372FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707251

Amount of Each Receipt this Period

85.00

☐ Memo Item  
CONTRIBUTION

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

**C. GUERRANT, PETER, D., ,**

Mailing Address 352 CLOUDES MILL DR.

City  
ALEXANDRIAState  
VAZip Code  
22304-3078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
U.S. ARMYOccupation (for Individual)  
PERSONNEL MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650790

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

610.00

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

FOR LINE NUMBER: PAGE 114 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. GUESS, DIANE, M., MRS.,**

Mailing Address 184 SAWYER LN

City  
JASPERState  
GAZip Code  
30143-7045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.57

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27667802**

Amount of Each Receipt this Period

45.00

☐ Memo Item

CONTRIBUTION

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

**B. GUSSE, DAVID, C., MR.,**

Mailing Address 1431 RED BRICK RD

City  
DIXONState  
ILZip Code  
61021-8323FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27671232**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

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

**C. GUSSE, DAVID, C., MR.,**

Mailing Address 1431 RED BRICK RD

City  
DIXONState  
ILZip Code  
61021-8323FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27723241**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

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

220.00

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

FOR LINE NUMBER: PAGE 115 OF 6441

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. GUTENKUNST, RANDAL, L., ,**

Mailing Address 4102 WILLS BLVD

City  
PUEBLOState  
COZip Code  
81008-1735FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721589

Amount of Each Receipt this Period

235.00

☐ Memo Item  
CONTRIBUTION

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

**B. HAAS, BERNADETTE, , ,**

Mailing Address PO BOX 50

City  
LAKE FORESTState  
ILZip Code  
60045-0050FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CARL A. HAAS AUTOMOBILE IMPORTS, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707627

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. HABERMANN, CHARLES, , MR.,**

Mailing Address 27 PUEBLO VISTA DR

City  
PALM SPRINGSState  
CAZip Code  
92264-6375FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653905

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

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

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

775.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 116 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

**A. HABERMANN, CHARLES, , MR.,**

Mailing Address 27 PUEBLO VISTA DR

City  
PALM SPRINGSState  
CAZip Code  
92264-6375FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681475

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**B. HABETLER, ANNA, M., ,**

Mailing Address 7660 ROWENA ST

City  
SAN DIEGOState  
CAZip Code  
92119-1245FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.10

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721794

Amount of Each Receipt this Period

105.00

☐ Memo Item  
CONTRIBUTION

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

**C. HABRYLE, LEROY, , MR.,**

Mailing Address 26415 204TH AVE SE

City  
COVINGTONState  
WAZip Code  
98042-6154FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650786

Amount of Each Receipt this Period

50.00

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

355.00



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

FOR LINE NUMBER: PAGE 117 OF 6441

(check only one)

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

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

NAME OF COMMITTEE (In Full)

NRCC

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

**A. HADLEY, CHARLES, A., MR.,**Mailing Address 4840 THUNDERBIRD DR  
APT 383City  
BOULDERState  
COZip Code  
80303-3830FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27672340

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. HADLEY, CHARLES, A., MR.,**Mailing Address 4840 THUNDERBIRD DR  
APT 383City  
BOULDERState  
COZip Code  
80303-3830FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27731339

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAISLER, SHIRLEY, A., MS.,**

Mailing Address 1200 COWLING RD

City  
SANGERState  
TXZip Code  
76266-9084FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

307.50

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27657680

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

525.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HALL, HUNTER, , ,**

Mailing Address 614 TIVOLI PSGE

City  
ALEXANDRIAState  
VAZip Code  
22314-1900FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THE PICARD GROUPOccupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27681297

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HALL, ROSEMARY, , ,**

Mailing Address 6532 PASILLA RD. NE

City  
RIO RANCHOState  
NMZip Code  
87144-4902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.61

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677689

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HALL, ROSEMARY, , ,**

Mailing Address 6532 PASILLA RD. NE

City  
RIO RANCHOState  
NMZip Code  
87144-4902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.61

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707608

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

270.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HALL, ROSEMARY, , ,**

Mailing Address 6532 PASILLA RD. NE

City  
RIO RANCHOState  
NMZip Code  
87144-4902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27741618**

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMBY, WILLIAM, W., MR.,**

Mailing Address 409 ELM LN

City  
LINDALEState  
TXZip Code  
75771-3302FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698741**

Amount of Each Receipt this Period

140.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMBY, WILLIAM, W., MR.,**

Mailing Address 409 ELM LN

City  
LINDALEState  
TXZip Code  
75771-3302FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701766**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

280.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 120 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMILTON, BILL, , ,**

Mailing Address 7713 KOLMAR AVE

City  
SKOKIEState  
ILZip Code  
60076-3654FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27696346**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMILTON, NANCY, , MS.,**

Mailing Address 11 CORAL DR.

City  
PITTSBURGHState  
PAZip Code  
15238-2605FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650884**

Amount of Each Receipt this Period

600.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMMER, GREG, , ,**

Mailing Address 914 SUTTON DR.

City  
XENIAState  
OHZip Code  
45385-1806FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27695643**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

950.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 121 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMMONS, JOYCE, , ,**

Mailing Address 3525 NEW DELHI DR.

City  
WINSTON SALEMState  
NCZip Code  
27101-6211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675959

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMMONS, JOYCE, , ,**

Mailing Address 3525 NEW DELHI DR.

City  
WINSTON SALEMState  
NCZip Code  
27101-6211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741470

Amount of Each Receipt this Period

45.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMPTON, ELAINA, , ,**Mailing Address 2895 SIENA LAKES CIR  
UNIT 5233City  
NAPLESState  
FLZip Code  
34109-9098FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676472

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

370.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANCOCK, HAROLD, , ,**

Mailing Address 1210 HUNTLY PL

City  
ALEXANDRIAState  
VAZip Code  
22307-2001FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BROWNSTEIN HYATT FARBER SCHREKOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27650268**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANLEIGH, STEPHEN, , ,**

Mailing Address 317 PASADERA CT

City  
MONTEREYState  
CAZip Code  
93940-7621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27748076**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HANSEN, JUDY, , MRS.,**

Mailing Address P.O.BOX 4213

City  
SHOW LOWState  
AZZip Code  
85902-4213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27702391**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1025.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 123 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARDY, RICHARD, B., MR.,**

Mailing Address 88 MASONIC HOME RD APT R313

City  
CHARLTONState  
MAZip Code  
01507-3304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.78

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676131

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707247

Amount of Each Receipt this Period

105.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAWK, CAROL, , ,**

Mailing Address 797 TULIP DR

City  
SEBASTIANState  
FLZip Code  
32958-5445FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REALTORS ASSOCIATION OF INDIAN RIVER COccupation (for Individual)  
CHIEF EXECUTIVE OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715715

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

640.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAWKINS, PHYLLIS, , ,**

Mailing Address 990-9TH AVE NW #202

City  
SAINT PAULState  
MNZip Code  
55112-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.14

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27676658**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAYES, DELMORE, G., MR.,**

Mailing Address 81862 SUN CACTUS LN

City  
LA QUINTAState  
CAZip Code  
92253-7745FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.47

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27676281**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAYES, DELMORE, G., MR.,**

Mailing Address 81862 SUN CACTUS LN

City  
LA QUINTAState  
CAZip Code  
92253-7745FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.47

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721550**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAYES, JOHN, , ,**

Mailing Address 3548 PEBBLE BEACH DR.

City  
AUGUSTAState  
GAZip Code  
30907-9520FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671656

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAYES, ROGER, , ,**

Mailing Address 129 OLD TIMBER LN

City  
MOORESVILLEState  
NCZip Code  
28117-5824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704566

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAYNES, MARIE, R., MS.,**

Mailing Address 4 DAVIS CIR

City  
SUTTONState  
MAZip Code  
01590-1834FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671344

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 126 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAYNES, MARIE, R., MS.,**

Mailing Address 4 DAVIS CIR

City  
SUTTONState  
MAZip Code  
01590-1834FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27731219

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAZELL, KATHLEEN, , ,**

Mailing Address 35 WATERGATE DR.

City  
SARASOTAState  
FLZip Code  
34236-5512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27682049

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEDAYA, ROBERT, V., MR.,**

Mailing Address 429 AVENUE T

City  
BROOKLYNState  
NYZip Code  
11223-4001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741652

Amount of Each Receipt this Period

360.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

425.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEINRICH, SARAH, J., MRS.,**

Mailing Address 6004 AMBER OAKS AVE

City  
BAKERSFIELD

State  
CA

Zip Code  
93306-7008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.54

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025

**Transaction ID : SA11A.27696250**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEINRICH, SARAH, J., MRS.,**

Mailing Address 6004 AMBER OAKS AVE

City  
BAKERSFIELD

State  
CA

Zip Code  
93306-7008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.54

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

**Transaction ID : SA11A.27722851**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEITHOLD, CYNTHIA, , ,**

Mailing Address PO BOX 337

City  
HI RLS MTN PK

State  
NM

Zip Code  
88325-0337

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025

**Transaction ID : SA11A.27685100**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

285.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 128 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HELFEN, WILLIAM, , ,**

Mailing Address 5437 HARGROVE BOULEVARD

City  
VIRGINIA BEACHState  
VAZip Code  
23464-2333FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698896**

Amount of Each Receipt this Period

80.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HELLMANN, RALPH, P., MR.,**

Mailing Address 3310 OLD DOMINION BOVD

City  
ALEXANDRIAState  
VAZip Code  
22305-1318FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LUGAR HELLMANN GROUPOccupation (for Individual)  
GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693170**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENDERSON, RICHARD, ROBERT, MR.,**

Mailing Address 2556 N NC HIGHWAY 119

City  
MEBANEState  
NCZip Code  
27302-9371FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721843**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1180.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 129 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENDERSON, RICHARD, ROBERT, MR.,**

Mailing Address 2556 N NC HIGHWAY 119

City  
MEBANEState  
NCZip Code  
27302-9371FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722990

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENRY, JAMES, R., MR.,**

Mailing Address 2608 COLLEGE DRIVE

City  
VICTORIAState  
TXZip Code  
77901-4482FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE AND SECURITIES SALE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.52

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707047

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENRY, TED, , ,**

Mailing Address 3001 ROUTE 130, APT. 3K

City  
DELRANState  
NJZip Code  
08075-2614FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DEPT OF TREASURYOccupation (for Individual)  
QC TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.32

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726960

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

400.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERMAN, VIRGINIA, , ,**

Mailing Address 94 SCHOOL ST

City  
GLEN COVEState  
NYZip Code  
11542-2513FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27657557**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERMAN, VIRGINIA, , ,**

Mailing Address 94 SCHOOL ST

City  
GLEN COVEState  
NYZip Code  
11542-2513FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721668**

Amount of Each Receipt this Period

425.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERRING, DAVID, B., MR.,**

Mailing Address 8728 BALLY BUNION RD

City  
PORT SAINT LUCIEState  
FLZip Code  
34986-3086FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

ADMIRAL MGT

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647887**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

575.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 131 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERRON, KEIKO, Y., MRS.,**

Mailing Address 373 N ELMWOOD AVE.

City  
WOOD DALEState  
ILZip Code  
60191-1553FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27658156**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HESS, SUZANNE, , ,**

Mailing Address 5590 N BARRASCA AVE

City  
TUCSONState  
AZZip Code  
85750-6494FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27676076**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HESS, SUZANNE, , ,**

Mailing Address 5590 N BARRASCA AVE

City  
TUCSONState  
AZZip Code  
85750-6494FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726747**

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 132 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HESS, SUZANNE, , ,**

Mailing Address 5590 N BARRASCA AVE

City  
TUCSONState  
AZZip Code  
85750-6494FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741284

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEWITT, DIANE, , MS.,**

Mailing Address 8299 HEWITT LN

City  
EDISTO ISLANDState  
SCZip Code  
29438-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654239

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, JOAN, , ,**

Mailing Address 10123 GREEN TREE RD

City  
HOUSTONState  
TXZip Code  
77042-1229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704552

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1045.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 133 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, MICHAEL, , ,**

Mailing Address 740 OLD MURRELLS INLET RD

City  
MURRELLS INLETState  
SCZip Code  
29576-7273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GRAND STRAND HOMES AND LANDOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27748075**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILLARY, SHAUN, J., MR.,**

Mailing Address 619 STATE ROAD 50

City  
GROVELANDState  
FLZip Code  
34736-9408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681599**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLINGS, EDWARD, JOSEPH, MR.,**

Mailing Address 620 WADE AVE UNIT 502

City  
RALEIGHState  
NCZip Code  
27605-3293FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27741375**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 134 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HODGES, SAM, , ,**

Mailing Address 6202 EAST VOLTAIRE AVENUE

City  
SCOTTSDALEState  
AZZip Code  
85254-3853FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.88

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27731233

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLDER, FLOYD, WILLIAM, ,**

Mailing Address 114 NORCREST DRIVE

City  
SAN MARCOSState  
TXZip Code  
78666-3721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TEXAS STATE UNIVERSITYOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727279

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLLADAY, VIRGINIA, S., MRS.,**

Mailing Address 2247 MASONIC DR.

City  
SEWICKLEYState  
PAZip Code  
15143-2431FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671881

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

550.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 135 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLLOWAY, MARY, , ,**

Mailing Address 15691 COUNTY ROAD 472

City  
TYLERState  
TXZip Code  
75706-4022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650600

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLTON, BEVERLY, , ,**

Mailing Address 478 FORESTRIDGE DR

City  
BOONEState  
NCZip Code  
28607-9508FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722858

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLTSCRAW, LARRY, L., MR.,**

Mailing Address 5490 W. QUAIL AV.

City  
GLENDALEState  
AZZip Code  
85308-9130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676345

Amount of Each Receipt this Period

205.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

855.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 136 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOMONAI, JAMES, G., MR.,**

Mailing Address 250 HAYES AVE NE

City  
MASSILLONState  
OHZip Code  
44646-4358FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27696007

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOPKINS, MARK, T., MR.,**

Mailing Address 3043 S ROBERTSON RD

City  
CASPERState  
WYZip Code  
82604-3621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27672127

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOPKINS, MARK, T., MR.,**

Mailing Address 3043 S ROBERTSON RD

City  
CASPERState  
WYZip Code  
82604-3621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706982

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOPKINS, MARK, T., MR.,**

Mailing Address 3043 S ROBERTSON RD

City  
CASPERState  
WYZip Code  
82604-3621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722649

Amount of Each Receipt this Period

170.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOPKINS, MARK, T., MR.,**

Mailing Address 3043 S ROBERTSON RD

City  
CASPERState  
WYZip Code  
82604-3621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727522

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOPKINS, SCOTT, JAMES, MR.,**

Mailing Address 140 WILLIAMSBURG LN

City  
FORT WORTHState  
TXZip Code  
76107-1738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701794

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

470.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 138 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HORST, TERESA, , MRS.,**

Mailing Address 15906 HOTCHKISS VALLEY RD E

City  
LOUDONState  
TNZip Code  
37774-6069FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698663

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOVICK, CHRISTOPHER, GAMBRELL, MR.,**

Mailing Address 11106 PICKFAIR DR

City  
AUSTINState  
TXZip Code  
78750-2524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698641

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOVICK, CHRISTOPHER, GAMBRELL, MR.,**

Mailing Address 11106 PICKFAIR DR

City  
AUSTINState  
TXZip Code  
78750-2524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698645

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 139 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOVICK, CHRISTOPHER, GAMBRELL, MR.,**

Mailing Address 11106 PICKFAIR DR

City  
AUSTINState  
TXZip Code  
78750-2524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698646**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOVICK, CHRISTOPHER, GAMBRELL, MR.,**

Mailing Address 11106 PICKFAIR DR

City  
AUSTINState  
TXZip Code  
78750-2524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698650**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOVICK, CHRISTOPHER, GAMBRELL, MR.,**

Mailing Address 11106 PICKFAIR DR

City  
AUSTINState  
TXZip Code  
78750-2524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698652**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 140 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOVICK, CHRISTOPHER, GAMBRELL, MR.,**

Mailing Address 11106 PICKFAIR DR

City  
AUSTINState  
TXZip Code  
78750-2524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698742**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOVICK, CHRISTOPHER, GAMBRELL, MR.,**

Mailing Address 11106 PICKFAIR DR

City  
AUSTINState  
TXZip Code  
78750-2524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27741420**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOVICK, CHRISTOPHER, GAMBRELL, MR.,**

Mailing Address 11106 PICKFAIR DR

City  
AUSTINState  
TXZip Code  
78750-2524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27741424**

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 141 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOVICK, CHRISTOPHER, GAMBRELL, MR.,**

Mailing Address 11106 PICKFAIR DR

City  
AUSTINState  
TXZip Code  
78750-2524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741425

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOVICK, CHRISTOPHER, GAMBRELL, MR.,**

Mailing Address 11106 PICKFAIR DR

City  
AUSTINState  
TXZip Code  
78750-2524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741426

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOVIS, PASCAL, LEE, MR.,**

Mailing Address 2208 TOWHEE ALY

City  
BLACKSBURGState  
VAZip Code  
24060-6760FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726730

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 142 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOVIS, PASCAL, LEE, MR.,**

Mailing Address 2208 TOWHEE ALY

City  
BLACKSBURGState  
VAZip Code  
24060-6760FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726821

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOWELL, JOSEPH, , ,**

Mailing Address 709 DEVON PL

City  
ALEXANDRIAState  
VAZip Code  
22314-1213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BROWNSTEIN HYATT FABER SCHRECK, LLPOccupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27667473

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOY, BARBARA, , ,**

Mailing Address 206 BRECKS LN

City  
WILMINGTONState  
DEZip Code  
19807-3011FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

359.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741414

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

800.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 143 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HRIC, CYNTHIA, S., MISS,**

Mailing Address 1603 CALUMET AVE APT 1

City  
WHITINGState  
INZip Code  
46394-1227FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704558

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HRIC, CYNTHIA, S., MISS,**

Mailing Address 1603 CALUMET AVE APT 1

City  
WHITINGState  
INZip Code  
46394-1227FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730901

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HSU, PI, YUNG, ,**

Mailing Address 6720 NW 48TH LN

City  
GAINESVILLEState  
FLZip Code  
32653-3953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707033

Amount of Each Receipt this Period

70.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

770.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 144 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUANG, HSIU, HSU, ,**

Mailing Address 111 HOWARD ST NE

City  
ATLANTAState  
GAZip Code  
30317-1109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741371

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUANG, JOSEPH, C., MR.,**

Mailing Address 15 SANDALWOOD DR

City  
PARSIPPANYState  
NJZip Code  
07054-1621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.76

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701763

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUANG, JOSEPH, C., MR.,**

Mailing Address 15 SANDALWOOD DR

City  
PARSIPPANYState  
NJZip Code  
07054-1621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

437.76

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27702197

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 145 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUANG, JOSEPH, C., MR.,**

Mailing Address 15 SANDALWOOD DR

City  
PARSIPPANYState  
NJZip Code  
07054-1621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741390

Amount of Each Receipt this Period

17.76

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUANG, JOSEPH, C., MR.,**

Mailing Address 15 SANDALWOOD DR

City  
PARSIPPANYState  
NJZip Code  
07054-1621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741391

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUANG, JOSEPH, C., MR.,**

Mailing Address 15 SANDALWOOD DR

City  
PARSIPPANYState  
NJZip Code  
07054-1621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

437.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741392

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

167.76

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 146 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUANG, JOSEPH, C., MR.,**

Mailing Address 15 SANDALWOOD DR

City  
PARSIPPANYState  
NJZip Code  
07054-1621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741792

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27696326

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUFFMAN, VIRGINIA, , ,**

Mailing Address PO BOX 1198

City  
MARANAState  
AZZip Code  
85653-1198FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IMAGINE REALTY SERVICESOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748060

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUGHES, ALBERT, E., ,**

Mailing Address 401 N CHAPARRAL ST APT 240

City  
CORPUS CHRISTIState  
TXZip Code  
78401-1118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707776

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUGHES, KATHLEEN, B., MS.,**

Mailing Address 6400 N COUNTY 75 RD

City  
COLUMBIAState  
ALZip Code  
36319-5124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653764

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUGHES, KATHLEEN, B., MS.,**

Mailing Address 6400 N COUNTY 75 RD

City  
COLUMBIAState  
ALZip Code  
36319-5124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

243.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681566

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 148 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUGHES, KATHLEEN, B., MS.,**

Mailing Address 6400 N COUNTY 75 RD

City  
COLUMBIAState  
ALZip Code  
36319-5124FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27702251

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUGHES, KATHLEEN, B., MS.,**

Mailing Address 6400 N COUNTY 75 RD

City  
COLUMBIAState  
ALZip Code  
36319-5124FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704608

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUNT, RAYMOND, A., MR.,**

Mailing Address 500 SE COUNTY ROAD 2218

City  
CORSICANAState  
TXZip Code  
75109-9725FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27657547

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

540.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 149 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUNTER, NANCY, , ,**Mailing Address 501 V E S RD DHC 606  
APT C116City  
LYNCHBURGState  
VAZip Code  
24503-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707248

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IDDIGS, ROBERT, L., ,**

Mailing Address 5155 PATRICIA ST

City  
COCOAState  
FLZip Code  
32927-3239FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722967

Amount of Each Receipt this Period

125.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. INMAN, MARY, DIANE, MRS.,**

Mailing Address 803 CLARK RD

City  
CERESCOState  
MIZip Code  
49033-9606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726384

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

475.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 150 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. INMAN, MARY, DIANE, MRS.,**

Mailing Address 803 CLARK RD

City  
CERESCOState  
MIZip Code  
49033-9606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730890

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IOVINO, CHARLIE, , ,**

Mailing Address 1155 F STREET, NW

City  
WASHINGTONState  
DCZip Code  
20004-1312FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BROWNSTEIN HYATT FABER SCHRECK, LLPOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27667478

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IVERS, DONALD, , MR.,**

Mailing Address 1511 PAUL SPRING PARKWAY

City  
ALEXANDRIAState  
VAZip Code  
22308-1143FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

723.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736928

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

625.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 151 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IVESTER, JOHN, F., MR., JR.**

Mailing Address PO BOX 2457

City  
HUNTERSVILLEState  
NCZip Code  
28070-2457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MAXXON S. E.Occupation (for Individual)  
OWNER OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698879**

Amount of Each Receipt this Period

625.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IVEY, WYNELLE, M., ,**

Mailing Address 1828 WINDSOR DR

City  
MESQUITEState  
TXZip Code  
75181-2356FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650947**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACKSON, JOHN, R., MR.,**

Mailing Address 12306 COBBLESTONE DR

City  
HOUSTONState  
TXZip Code  
77024-4903FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27702241**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

975.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 152 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACKSON, RICHARD, N., MR.,**Mailing Address 100 MCAULEY DR.  
APT 107City  
ROCHESTERState  
NYZip Code  
14610-2342FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671785**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACKSON, RICHARD, N., MR.,**Mailing Address 100 MCAULEY DR.  
APT 107City  
ROCHESTERState  
NYZip Code  
14610-2342FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726655**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JARED, BRIAN, , ,**

Mailing Address 1625 E. PRIMROSE STREET

City  
SPRINGFIELDState  
MOZip Code  
65804-7929FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MURNEY ASSOCIATES, REALTORSOccupation (for Individual)  
REAL ESTATE BROKER-SALESPERS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27715718**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

650.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 153 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JARVIS, SUSAN, J., ,**

Mailing Address 11496 COUNTY ROAD 190

City  
KENTONState  
OHZip Code  
43326-9511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647861

Amount of Each Receipt this Period

210.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JASO, JOE, , ,**

Mailing Address 7805 DAYBREAK COURT

City

ALEXANDRIA

State

VA

Zip Code

22306-2714

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BROWNSTEIN, HYATT, FARBER, SCHRECKOccupation (for Individual)  
POLICY DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27650255

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JETT, TOMMIE, S., ,**

Mailing Address 1005 WOODLAND RIDGE RD

City

ODENVILLE

State

AL

Zip Code

35120-6717

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677493

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

960.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 154 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JIANG, XIANG, J., ,**Mailing Address 14015 HOLLY AVE  
APT 4CCity  
FLUSHINGState  
NYZip Code  
11355-3432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27676058**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, BRUCE, W., ,**

Mailing Address 12216 GREY BIRCH CIR

City  
ORLANDOState  
FLZip Code  
32832-5701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.58

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27658029**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, GARY, D., MR.,**

Mailing Address 366 8TH ST.

City  
IDAHO FALLSState  
IDZip Code  
83401-4862FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27672018**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

435.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 155 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, JAY, , ,**

Mailing Address 3301 S OLAF HILL DR.

City  
HACIENDA HEIGHTSState  
CAZip Code  
91745-6142FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.84

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654188

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, KAY, , ,**

Mailing Address 800 NAVAJO AVE

City  
FORT MORGANState  
COZip Code  
80701-4081FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.15

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722298

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, LUKE, , ,**

Mailing Address 464 LAKEVIEW WAY

City  
FARMINGTONState  
UTZip Code  
84025-3313FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BHFSOccupation (for Individual)  
GOV AFFAIRS CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27667529

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

625.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 156 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSTON, MARY, KAYE, MRS.,**

Mailing Address 21241 SE 40TH ST.

City  
SAMMAMISHState  
WAZip Code  
98075-5238FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27707751**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, PAUL, E., MR., JR.**

Mailing Address 4502 TOURNAY RD

City  
BETHESDAState  
MDZip Code  
20816-1843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27741900**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSTON, SANDRA, , ,**

Mailing Address 32 NEW VILLAGE LN

City  
SMYRNAState  
DEZip Code  
19977-4715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.48

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27651136**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

775.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 157 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNSTON, SANDRA, , ,

Mailing Address 32 NEW VILLAGE LN

City  
SMYRNAState  
DEZip Code  
19977-4715FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.48

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701769

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSTON, SANDRA, , ,

Mailing Address 32 NEW VILLAGE LN

City  
SMYRNAState  
DEZip Code  
19977-4715FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.48

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741413

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, VICKY, A., MRS.,

Mailing Address 1457 SMYTH RD

City  
MOUNT VERNONState  
IAZip Code  
52314-9540FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27695744

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 158 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, EDWIN, R., MR.,**

Mailing Address 12105 HILLTOP DR.

City  
LOS ALTOS HILLSState  
CAZip Code  
94024-5216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650364**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, RICHARD, T., ,**

Mailing Address 117 W CLIFF ST

City  
SOMERVILLEState  
NJZip Code  
08876-1414FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27723231**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JORDAN, JOHN, R., ,**

Mailing Address 1280 MAIN ST

City  
BRAWLEYState  
CAZip Code  
92227-9404FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657997**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 159 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOYNES, GRETA, , ,**

Mailing Address 1210 CHADWICK AVENUE

City  
ALEXANDRIAState  
VAZip Code  
22308-1720FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BHFSOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27671157

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAUFMANN, BARBARA, A., ,**

Mailing Address 465 QUARRY HILL RD. APT. 117

City  
SOUTH BURLINGTONState  
VTZip Code  
05403-5980FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676841

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAUFMANN, BARBARA, A., ,**

Mailing Address 465 QUARRY HILL RD. APT. 117

City  
SOUTH BURLINGTONState  
VTZip Code  
05403-5980FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722681

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 160 OF 6441

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAUFMANN, BARBARA, A., ,**

Mailing Address 465 QUARRY HILL RD. APT. 117

City  
SOUTH BURLINGTONState  
VTZip Code  
05403-5980FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27727526**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675943**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEIL, BYRON, L., MR.,**Mailing Address 1600 TEXAS ST  
APT 3602City  
FORT WORTHState  
TXZip Code  
76102-3695FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698707**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

600.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 161 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KELLEY, SHEILA, K., ,

Mailing Address 13241 CRISA DR.

City  
WEST PALM BEACHState  
FLZip Code  
33410-1492FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721610

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELLEY, SHEILA, K., ,

Mailing Address 13241 CRISA DR.

City  
WEST PALM BEACHState  
FLZip Code  
33410-1492FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721729

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KEMMERER, GORDON, PAUL, MR.,

Mailing Address 422 SE BIRDIE CIR

City  
CEDAREDGEState  
COZip Code  
81413-3851FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

772.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677385

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 162 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KIER, DAVID, ALLAN, MR.,**

Mailing Address 8218 CAPTAIN HAWKINS CT

City  
ANNANDALEState  
VAZip Code  
22003-4602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27651041

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIM, PHILLIP, K., MR.,**

Mailing Address 1134 S ST ANDREWS PL

City  
LOS ANGELESState  
CAZip Code  
90019-3629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
SECURITY GUARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701948

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KIM, PHILLIP, K., MR.,**

Mailing Address 1134 S ST ANDREWS PL

City  
LOS ANGELESState  
CAZip Code  
90019-3629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
SECURITY GUARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27731228

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 163 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KING, JAMES, , ,**

Mailing Address 6607 WOODLAND CIRCLE

City  
FORT SMITHState  
ARZip Code  
72916-8988FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650399

Amount of Each Receipt this Period

45.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KING, STANLEY, L., , JR.**Mailing Address 20520 FALCONS LANDING CIR.  
APT. 2207City  
STERLINGState  
VAZip Code  
20165-7597FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727093

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, TANYA, LUNN, MRS.,**

Mailing Address 1048 ELLERBE CT.

City  
SHREVEPORTState  
LAZip Code  
71106-7757FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657745

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

245.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 164 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KINNEY, MARTIN, M., MR.,**

Mailing Address 8629 SPRUCE GROVE CT. NE

City  
LELANDState  
NCZip Code  
28451-5038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727017

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KINNEY, TERESA, , ,**

Mailing Address 1717 N BAYSHORE DR SUITE 2931

City  
MIAMIState  
FLZip Code  
33132-1164FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MIAMI ASSOCIATION OF REALTORS INCOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748063

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KINSER, VICKI, , ,**

Mailing Address PO BOX 767

City  
MORRISTOWNState  
TNZip Code  
37815-0767FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721926

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

950.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 165 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KISHIMOTO, EVERETT, K., ,**

Mailing Address 94-320 KEALAKAA ST

City  
MILILANIState  
HIZip Code  
96789-2159FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650673

Amount of Each Receipt this Period

125.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KISHIMOTO, EVERETT, K., ,**

Mailing Address 94-320 KEALAKAA ST

City  
MILILANIState  
HIZip Code  
96789-2159FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27723171

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLEIN, MICHAEL, F., MR.,**

Mailing Address 5220 KLEE MILL RD S

City  
SYKESVILLEState  
MDZip Code  
21784-9257FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CHARLES A. KLEIN AND SONS

Occupation (for Individual)

MECHANICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4330.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657768

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

475.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 166 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOCHTITZKY, GENE, S., MRS.,**

Mailing Address 273 RALPH RAWLS RD

City  
HATTIESBURGState  
MSZip Code  
39402-8790FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27677071**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOCHTITZKY, GENE, S., MRS.,**

Mailing Address 273 RALPH RAWLS RD

City  
HATTIESBURGState  
MSZip Code  
39402-8790FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27731358**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOEBKE, MARGARET, , ,**

Mailing Address 5508 FLOWERING MEADOWS AVE

City  
LAS VEGASState  
NVZip Code  
89131-5200FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27707043**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

355.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 167 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOLAR, RONALD, J., MR.,**

Mailing Address 1508 NORTH HWY. APT. 316

City  
JACKSONState  
MNZip Code  
56143-1083FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718902**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOLER, DONNA, , ,**

Mailing Address 7516 DOGWOOD LN

City  
CLEVELANDState  
OHZip Code  
44130-6134FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

FINANCIAL PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27677006**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KORBELL, BONNIE, BOWMAN, MRS.,**

Mailing Address 222 PARK HILL DR.

City  
SAN ANTONIOState  
TXZip Code  
78212-2512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HOMEMAKER

Occupation (for Individual)

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27658143**

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

950.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 168 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KORBELL, JOHN, CHARLES, MR.,**

Mailing Address 222 PARK HILL DR

City  
SAN ANTONIOState  
TXZip Code  
78212-2512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681652

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRAMER, KATHERINE, D., ,**

Mailing Address 191 E ROYAL FOREST BLVD

City  
COLUMBUSState  
OHZip Code  
43214-2125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681519

Amount of Each Receipt this Period

120.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KRUGER, WELDON, D., MR.,**Mailing Address 1851 CARROLL FANCHER WAY  
APT 415City  
COLLEGE STATIONState  
TXZip Code  
77845-2044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27731380

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

870.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 169 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUCAVIK, GARY, , ,**

Mailing Address 115 LAWNGDALE AVE.

City  
BARTONVILLEState  
ILZip Code  
61607-1837FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27723287**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUIPERS BLAKE, MELISSA, , ,**Mailing Address 410 17TH ST  
FL 22City  
DENVERState  
COZip Code  
80202-4437FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BROWNSTEIN HYATT FARBER SCHRECK, LLPOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664578**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KURTENBACH, AELRED, J., MR.,**

Mailing Address 47209 220TH ST.

City  
BROOKINGSState  
SDZip Code  
57006-7112FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DAKTRINICS INCORPORATEDOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27651241**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1800.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 170 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KVIZ, LINDA, , ,**

Mailing Address 695 CANTON CT

City  
OSWEGOState  
ILZip Code  
60543-5700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27731178**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LADICK, WALTER, F., MR., JR.**

Mailing Address 342 PHYLLIS DRIVE

City  
PATCHOGUEState  
NYZip Code  
11772-1816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27741303**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAFLEUR, KENNETH, C., MR.,**

Mailing Address 1108 KATHERINE DR.

City  
OPELOUSASState  
LAZip Code  
70570-8306FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27727122**

Amount of Each Receipt this Period

625.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 171 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAGE, JOHN, R., MR.,**Mailing Address **BOX 314**City  
**SHEFFIELD**State  
**IA**Zip Code  
**50475-0314**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**531.16**

Date of Receipt

**02 / 25 / 2025****Transaction ID : SA11A.27721616**

Amount of Each Receipt this Period

**175.00**☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAM, BEN, MINH, MR.,**Mailing Address **3002 ALBANY CT**City  
**WOODBIDGE**State  
**VA**Zip Code  
**22193-1208**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**599.64**

Date of Receipt

**02 / 06 / 2025****Transaction ID : SA11A.27657821**

Amount of Each Receipt this Period

**80.00**☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LASSEN, ROBERT, , ,**Mailing Address **7001 FIRTH ROAD**City  
**FIRTH**State  
**NE**Zip Code  
**68358-6209**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**350.00**

Date of Receipt

**02 / 12 / 2025****Transaction ID : SA11A.27682137**

Amount of Each Receipt this Period

**250.00**☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►**505.00**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 172 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LE, MY, DUNG, ,**

Mailing Address 231 BEAL AVE

City  
PLACENTIAState  
CAZip Code  
92870-2539FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741399

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LE NORMAN, DUANE, A., MR.,**

Mailing Address 129 S BAY DR

City  
BULLARDState  
TXZip Code  
75757-9351FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654433

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LE NORMAN, DUANE, A., MR.,**

Mailing Address 129 S BAY DR

City  
BULLARDState  
TXZip Code  
75757-9351FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704536

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 173 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEAHY, PATRICIA, , ,**

Mailing Address 750 WETMORE HEIGHTS

City  
COLORADO SPRINGSState  
COZip Code  
80906-8608FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27657627

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEATHERMAN, THOMAS, , ,**

Mailing Address 2119 SHADOWBROOK CIR.

City  
HARLINGENState  
TXZip Code  
78550-3973FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

KELLER WILLIAMS LRGV

Occupation (for Individual)

REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748050

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEE, JAMES, , ,**

Mailing Address PO BOX 735

City  
WINCHESTERState  
ORZip Code  
97495-0735FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27651269

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 174 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, RICHARD, T., MR.,**

Mailing Address P.O. BOX 2113

City  
ORLANDOState  
FLZip Code  
32802-2113FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

901.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27657674

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEIDY, MARY, , ,**

Mailing Address 2212 BRIARCREST DR

City  
PLANOState  
TXZip Code  
75023-1656FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

COLLIN COUNTY AREA REALTORS

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748054

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LELAND, KATHERINE, A., ,**Mailing Address 26 PENN RD  
APT 439City  
HANOVERState  
NHZip Code  
03755-1269FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676882

Amount of Each Receipt this Period

210.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

760.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 175 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEMBO, LORETTA, , MS.,**

Mailing Address 2121 ESCOBAR AVE.

City  
THE VILLAGESState  
FLZip Code  
32159-9524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27695542

Amount of Each Receipt this Period

140.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEONARD, JAMES, WALTER, MR.,**

Mailing Address 500 1/2 S MAIN ST

City  
MANSFIELDState  
OHZip Code  
44907-5005FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
CLERK CASHIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721614

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEONICK, MARINA, A., MS.,**Mailing Address 954 LORIMER ST  
APT A6City  
BROOKLYNState  
NYZip Code  
11222-3104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653983

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 176 OF 6441  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEONICK, MARINA, A., MS.,**Mailing Address 954 LORIMER ST  
APT A6City  
BROOKLYNState  
NYZip Code  
11222-3104FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27672124

Amount of Each Receipt this Period

80.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEONICK, MARINA, A., MS.,**Mailing Address 954 LORIMER ST  
APT A6City  
BROOKLYNState  
NYZip Code  
11222-3104FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677000

Amount of Each Receipt this Period

47.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEONICK, MARINA, A., MS.,**Mailing Address 954 LORIMER ST  
APT A6City  
BROOKLYNState  
NYZip Code  
11222-3104FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27678027

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

177.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 177 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LESIN, BENJAMIN, E., MR.,**Mailing Address 1318 ROXBURY DR.  
317City  
LOS ANGELESState  
CAZip Code  
90035-4751FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726443**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LESTER, JOHN, W., MR.,**

Mailing Address 3008 W AUBURN HILL ST

City  
SIOUX FALLSState  
SDZip Code  
57108-1536FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27677663**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LESTER, JOHN, W., MR.,**

Mailing Address 3008 W AUBURN HILL ST

City  
SIOUX FALLSState  
SDZip Code  
57108-1536FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721784**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 178 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINDSEY, ROBERT, L., MR.,**

Mailing Address 1301 AN COUNTY ROAD 305

City  
FRANKSTONState  
TXZip Code  
75763-7007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707271

Amount of Each Receipt this Period

125.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LINDSEY, TOMMY, , MR.,**

Mailing Address 11222 LONG BRANCH DR.

City  
AUSTINState  
TXZip Code  
78736-6505FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27723242

Amount of Each Receipt this Period

280.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINNELL, RICHARD, , ,**

Mailing Address 2804 ORCHARD LAKE RD, STE 203

City  
KEEGO HARBORState  
MIZip Code  
48320-1449FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LINNELL AND ASSOCIATES, PLLCOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715719

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

905.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 179 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINSENBACH, RICHARD, , ,**

Mailing Address 5 GLEN CIR

City  
HUMMELSTOWNState  
PAZip Code  
17036-9261FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27731105

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIVELY, RONALD, A., MR.,**

Mailing Address 16400 GENITO RD

City  
MOSELEYState  
VAZip Code  
23120-1071FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650298

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOENICK, MARINA, , MS.,**

Mailing Address 954 LORIMER ST

City  
BROOKLYNState  
NYZip Code  
11222-3104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647779

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 180 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOENICK, MARINA, , MS.,**

Mailing Address 954 LORIMER ST

City  
BROOKLYNState  
NYZip Code  
11222-3104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27648003

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LONG, THAD, , ,**

Mailing Address 2880 BALMORAL RD

City  
MOUNTAIN BRKState  
ALZip Code  
35223-1236FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27699190

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOUIE, FRANK, , ,**

Mailing Address 1847 W 41ST DR

City  
LOS ANGELESState  
CAZip Code  
90062-1517FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27696338

Amount of Each Receipt this Period

70.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

370.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 181 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUTSCHG, VIVIAN, , MRS.,**

Mailing Address 2400 MAPLE ST.

City  
CHADRONState  
NEZip Code  
69337-9369FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.80

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27676830**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUTTRELL, DIANNE, , ,**

Mailing Address 908 E CACHE LA POUDRE ST

City  
COLORADO SPGSState  
COZip Code  
80903-2712FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27677655**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LYNCH, SAMUEL, J., MR., JR.**

Mailing Address 350 HARVEST DR

City  
YORKState  
PAZip Code  
17404-8337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SACSOccupation (for Individual)  
DIRECTOR - FINANCIAL CONSULTAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27722891**

Amount of Each Receipt this Period

125.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

385.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 182 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MA, EDWIN, , MR.,**

Mailing Address 2712 FENWICK LN

City  
PLANOState  
TXZip Code  
75093-3436FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671524

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MA, EDWIN, , MR.,**

Mailing Address 2712 FENWICK LN

City  
PLANOState  
TXZip Code  
75093-3436FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721676

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACKAY, DEBORAH, A., MS.,**

Mailing Address 503 RAIN TREE DR

City  
GLEN ELLYNState  
ILZip Code  
60137-6714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27672008

Amount of Each Receipt this Period

350.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 183 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAGILL, ARNOLD, R., MR.,**Mailing Address 711 MATADOR LN  
APT 202City  
MESQUITEState  
TXZip Code  
75149-8828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27707130**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAHAFFEY, JOE, L., MR.,**

Mailing Address PO BOX 314

City  
YELLOW JACKETState  
COZip Code  
81335-0314FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.05

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27676802**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAHANEY, ANDREW, B., MR.,**

Mailing Address 1232 KILOU ST

City  
WAILUKUState  
HIZip Code  
96793-9751FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27708095**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 184 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAIER, ELIZABETH, , ,**

Mailing Address 223 S. LEE STREET

City  
ALEXANDRIAState  
VAZip Code  
22314-3307FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BROWNSTEIN HYATT FARBER AND SCHRECK

Occupation (for Individual)

POLICY DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27671158

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MALICK, F, L., MR.,**

Mailing Address 916 NIAGARA FALLS DR.

City  
REDMONDState  
ORZip Code  
97756-7055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676482

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MALTONI, GLORIA, ANN, MRS.,**

Mailing Address 734 PARK WAY

City  
SOUTH SAN FRANCISCOState  
CAZip Code  
94080-2510FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654550

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1800.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 185 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANEVAL, CHRISTOPHER, C., ,**

Mailing Address 20TH STREET NORTHWEST

City  
WASHINGTONState  
DC

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PORTERFIELD, FETTIG, & SEARSOccupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27715749

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARCH, JAMES, , MR.,**

Mailing Address N3406 VERDE VALLEY RD N

City  
LA CROSSEState  
WIZip Code  
54601-2926FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722364

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARIS, W, D., ,**

Mailing Address 25262 VESPUCCI RD

City  
LAGUNA HILLSState  
CAZip Code  
92653-5231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726904

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2850.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 186 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAROLD, MARY, CARTER, ,**

Mailing Address PO BOX 509

City  
WARRENState  
TXZip Code  
77664-0509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27651157

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, EDWARD, S., MR.,**Mailing Address 112 MARWOOD RD  
APT 4237City  
CABOTState  
PAZip Code  
16023-2259FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1784.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650365

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, FRED, , MR., JR.**

Mailing Address 206 RIDGELAWN DR.

City  
ATHENSState  
ALZip Code  
35613-2018FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707371

Amount of Each Receipt this Period

205.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1505.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, JERRY, , ,**

Mailing Address 3449 FISCHER RD

City  
NEWNANState  
GAZip Code  
30265-1531FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657992

Amount of Each Receipt this Period

325.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, MARYANNE, , ,**

Mailing Address 1455 N WOODLAND AVE.

City  
TUCSONState  
AZZip Code  
85712-4142FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676148

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTINSON, RODNEY, , ,**

Mailing Address 13531 W SKY HAWK DR.

City  
SUN CITY WESTState  
AZZip Code  
85375-5832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

525.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676622

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

370.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 188 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27696295**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATHIEUX, MIREILLE, C., MS.,**

Mailing Address 2835 GLEN CANYON CIR

City  
SPRING VALLEYState  
CAZip Code  
91977-6722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27699151**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAURER, TAFFY, , ,**

Mailing Address 9121 ROCK SPRINGS RD.

City  
NEWCASTLEState  
CAZip Code  
95658-9712FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EXP REALTY OF CALIFORNIA INC.Occupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27748071**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

625.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 189 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAY, VERN, , ,**

Mailing Address 3369 NORTH 200 WEST

City  
LEHIState  
UTZip Code  
84043-4177FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707825

Amount of Each Receipt this Period

105.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAYE, PAUL, A., ,**

Mailing Address 72 PLEASURE TRL

City  
PENROSEState  
COZip Code  
81240-9676FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27708161

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAYHEW, PAUL, , MR.,**

Mailing Address 3790 EMERALD PARK DR.

City  
MILFORDState  
MIZip Code  
48380-3304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671645

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

605.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 190 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MC CAULEY, JAMES, , ,**

Mailing Address 34 BLOSSOM CT

City  
SOUTH KINGSTOWNState  
RIZip Code  
02879-1634FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27695710

Amount of Each Receipt this Period

375.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MC CAULEY, JAMES, , ,**

Mailing Address 34 BLOSSOM CT

City  
SOUTH KINGSTOWNState  
RIZip Code  
02879-1634FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722804

Amount of Each Receipt this Period

750.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCOSKER, DAVID, A., MR.,**

Mailing Address 3155 SANTA MARIA DR

City  
CONCORDState  
CAZip Code  
94518-2815FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650589

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1375.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 191 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCELWAIN, FLOYD, , MR.,**

Mailing Address PO BOX 575

City  
WATHENAState  
KSZip Code  
66090-0575FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27677332**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCELWAIN, FLOYD, , MR.,**

Mailing Address PO BOX 575

City  
WATHENAState  
KSZip Code  
66090-0575FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27722238**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCFADDEN, ROYCE, , MR.,**

Mailing Address 1250 FM 168

City  
OLTONState  
TXZip Code  
79064-2118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

267.29

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27741892**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

375.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 192 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCFARLAND, BREHON, K., ,**

Mailing Address 810 N LINCOLN ST

City  
COLVILLEState  
WAZip Code  
99114-2022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27672330

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCGAVOCK, VICKI, , ,**

Mailing Address 4004 109TH ST

City  
LUBBOCKState  
TXZip Code  
79423-0880FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.36

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27658113

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCGINTY, DON, , MR.,**

Mailing Address 714 SANTA MARIA ST

City  
SUGAR LANDState  
TXZip Code  
77478-3336FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715996

Amount of Each Receipt this Period

85.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

385.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 193 OF 6441

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCGRATH, BILL, , ,**

Mailing Address 1155 F STREET NORTHWEST

City  
WASHINGTONState  
DCZip Code  
20004-1312FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BHFSOccupation (for Individual)  
SHAREHOLDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27667477**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCGUIRE, BRIAN, , ,**

Mailing Address 1155 F STREET

City  
WASHINGTONState  
DCZip Code  
20004-1312FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BHFSOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27667476**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCINTYRE, DIANA, , ,**

Mailing Address 270930 E 1890 RD

City  
TEMPLEState  
OKZip Code  
73568-6072FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MCINTYRE INSURANCE AGENCY GPOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726964**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 194 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCKEE, JOHN, , ,**

Mailing Address P.O. BOX 43

City  
OLANTAState  
PAZip Code  
16863-0043FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707507

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCKEMEY, TRIPP, , ,**Mailing Address 1155 F STREET NORTHWEST  
SUITE 1200City  
WASHINGTONState  
DCZip Code  
20004-1329FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

BHFS

Occupation (for Individual)

GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27657485

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCKEY, DAVID, , ,**

Mailing Address 3280 MURPHY DRIVE

City  
BATON ROUGEState  
LAZip Code  
70809-1532FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

COLDWELL BANKER ONE

Occupation (for Individual)

REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748053

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1050.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 195 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCKISSICK, JAY, C., ,**

Mailing Address 3417 HAWTHORNE CT

City  
BARTLESVILLEState  
OKZip Code  
74006-4408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27708069

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCMILLAN, SUZANNE, I., MS.,**

Mailing Address 185 GOLDENWAVE LOOP

City  
MONTGOMERYState  
TXZip Code  
77316-2932FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671571

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCTAMNEY, BETTE, , ,**

Mailing Address 3113 EISENHOWER DRIVE

City  
EAST NORRITONState  
PAZip Code  
19403-4007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

REMAX 440 SKIPPACK

Occupation (for Individual)

REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715725

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 196 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEDEIROS, STEVE, , ,**

Mailing Address 1181 OLD CANYON RD

City  
FREMONTState  
CAZip Code  
94536-1733FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REALTY EXPERTSOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748066

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MELTON, JANET, , ,**

Mailing Address 711 DRIFTWOD DR.

City  
LYNN HAVENState  
FLZip Code  
32444-3434FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SWEETBAY REALTYOccupation (for Individual)  
BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748049

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MENDELSON, LISA, , ,**

Mailing Address 2521 S BAYSHORE DR

City  
MIAMIState  
FLZip Code  
33133-4704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27671160

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6000.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MENDELSON, VICTOR, H., MR.,**

Mailing Address 2521 S BAYSHORE DR

City  
MIAMIState  
FLZip Code  
33133-4704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HEICO CORPORATIONOccupation (for Individual)  
AEROSPACE MANUF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27671159

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MENKE, BYRON, , ,**

Mailing Address 54529 202ND STREET

City

PACIFIC JUNCTION

State

IA

Zip Code

51561-4282

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MENKE AUCTION & REALTYOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715733

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERCER, DOROTHY, M., MISS,**

Mailing Address 404 N YOUNG ST

City

FOLLETT

State

TX

Zip Code

79034-2102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706922

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5750.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEYER, DAVID, P., MR.,**

Mailing Address 1120 W FRANCIS RD

City  
NEW LENOXState  
ILZip Code  
60451-3551FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27715893**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILES, PAUL, , MR.,**Mailing Address 1077 RIVER RD  
APT 201City  
EDGEWATERState  
NJZip Code  
07020-1353FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27727395**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, BONNIE, L., MS.,**

Mailing Address 13097 TRIPLE CROWN LOOP

City  
GAINESVILLEState  
VAZip Code  
20155-6646FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27654435**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

750.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, BONNIE, L., MS.,**

Mailing Address 13097 TRIPLE CROWN LOOP

City  
GAINESVILLEState  
VAZip Code  
20155-6646FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27707322**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, CAROL, , MS.,**

Mailing Address 3629 RED OAK RD

City  
OREGONIAState  
OHZip Code  
45054-9763FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701850**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, FRED, B., MR.,**Mailing Address 12800 NE SALMON CREEK AVE  
UNIT 107City  
VANCOUVERState  
WAZip Code  
98686-3024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27707009**

Amount of Each Receipt this Period

800.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1800.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 200 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, JAMES, E., ,**

Mailing Address 2235 DEXTER RD.

City  
AUBURN HILLSState  
MIZip Code  
48326-2307FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671646

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, JAMES, E., ,**

Mailing Address 2235 DEXTER RD.

City  
AUBURN HILLSState  
MIZip Code  
48326-2307FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707980

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLS, DANIEL, , ,**

Mailing Address 369 SOUTH LAKE DRIVE

City  
PALM BEACHState  
FLZip Code  
33480-4571FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5505.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654146

Amount of Each Receipt this Period

4455.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4525.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 201 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-3606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715944

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MITCHELL, LORENA, E., MS.,**

Mailing Address PO BOX 2

City  
LORANEState  
ORZip Code  
97451-0002FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650615

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOELLER, CHERYL, L., ,**

Mailing Address 6015 HOLLADAY RD

City  
HILLSBOROState  
OHZip Code  
45133-6579FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727402

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

350.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOISIO, LEE, , ,**

Mailing Address P.O. BOX 12458

City  
ZEPHYR COVEState  
NVZip Code  
89448-4458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27667704**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOLACH, GERALD, NORMAN, MR.,**

Mailing Address 3425 150TH PL APT 4E

City  
FLUSHINGState  
NYZip Code  
11354-3902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WISER LLPOccupation (for Individual)  
CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27676825**

Amount of Each Receipt this Period

85.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOLAMPHY, PATRICK, , ,**

Mailing Address 402 MEYER FARM DRIVE

City  
PINEHURSTState  
NCZip Code  
28374-6972FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27744230**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12085.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 203 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTEJANO, LILLIAN, , ,**Mailing Address 9500 HARRITT RD  
SPC 292City  
LAKESIDEState  
CAZip Code  
92040-6292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650367

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTEJANO, LILLIAN, , ,**Mailing Address 9500 HARRITT RD  
SPC 292City  
LAKESIDEState  
CAZip Code  
92040-6292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676723

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTEJANO, LILLIAN, , ,**Mailing Address 9500 HARRITT RD  
SPC 292City  
LAKESIDEState  
CAZip Code  
92040-6292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681818

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 204 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTEJANO, LILLIAN, , ,**Mailing Address 9500 HARRITT RD  
SPC 292City  
LAKESIDEState  
CAZip Code  
92040-6292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27702224

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTEJANO, LILLIAN, , ,**Mailing Address 9500 HARRITT RD  
SPC 292City  
LAKESIDEState  
CAZip Code  
92040-6292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722386

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTEJANO, LILLIAN, , ,**Mailing Address 9500 HARRITT RD  
SPC 292City  
LAKESIDEState  
CAZip Code  
92040-6292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722456

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 205 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTGOMERY, JEAN, , ,**

Mailing Address 1036 PRESTWICK LANE

City  
GALLATINState  
TNZip Code  
37066-2495FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PMI MIDDLE TNOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27748059**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOODY, DAN, M., MR., JR.**

Mailing Address 3003 WEST ALABAMA

City  
HOUSTONState  
TXZip Code  
77098-2001FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MOODY RAMBINOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701924**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOONEY, EDWARD, A., MR.,**

Mailing Address 7 OCEAN DR.

City  
JUPITERState  
FLZip Code  
33469-3512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657870**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1750.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 206 OF 6441  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOORE, ARNOLD, L., MR.,**

Mailing Address 127 W COUNTRY GABLES DR

City  
PHOENIXState  
AZZip Code  
85023-5251FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.88

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27707984**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOORE, TERRY, L., MR.,**

Mailing Address 14218 WINDY CROSSING LN.

City  
HUMBLEState  
TXZip Code  
77396-1698FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27671196**

Amount of Each Receipt this Period

175.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOORE, TERRY, L., MR.,**

Mailing Address 14218 WINDY CROSSING LN.

City  
HUMBLEState  
TXZip Code  
77396-1698FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27727464**

Amount of Each Receipt this Period

175.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

550.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 207 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORIN, KATHLEEN, , ,**

Mailing Address 10 MEADOWLARK LANE

City  
EAST BRUNSWICKState  
NJZip Code  
08816-2717FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RE/MAX ONEOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748047

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORRISON, EDWARD, , ,**

Mailing Address 13026 BOOKER CEMETERY LN

City  
CLINTONState  
LAZip Code  
70722-5326FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27731444

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOSCHELLA, WILLIAM, E., MR.,**

Mailing Address 6712 MARBO COURT

City  
FALLS CHURCHState  
VAZip Code  
22046-2353FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BROWNSTEIN HYATT FARBER SCHRECKOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27650271

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 208 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOYLES, JAMES, W., MR., III**Mailing Address 1200 GULF BLVD  
APT 1705City  
CLEARWATER BEACHState  
FLZip Code  
33767-3702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698989**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURPHY, JOHN, R., MR., SR.**

Mailing Address 855 SAND AV

City  
EUGENEState  
ORZip Code  
97401-6050FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27657519**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURPHY, NANCY, B., MS.,**

Mailing Address 24 HARRINGTON LN

City  
DOTHANState  
ALZip Code  
36305-9732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27651053**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 209 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, NICOLE, , ,**

Mailing Address 178 MINISINK AVENUE PO BOX 488

City  
SHAWNEE ON DELAWARState  
PAZip Code  
18356-0488FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

POCONO MOUNTAINS ASSOCIATION OF REALTO

Occupation (for Individual)

ASSOCIATION EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715724

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NABORS, JAMES, L., ,**

Mailing Address 5064 WETHERSFIELD BLVD

City  
OLIVE BRANCHState  
MSZip Code  
38654-7826FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.66

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671333

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NACK, STEVE, L., ,**

Mailing Address 903 CHESTERFIELD DRIVE

City  
AMBLERState  
PAZip Code  
19002-2116FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676780

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

800.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 210 OF 6441  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NAVA, CARLOS, , MR.,**

Mailing Address 812 LOS OLIVOS DR

City  
SAN GABRIELState  
CAZip Code  
91775-1627FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27667763

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NAVA, CARLOS, , MR.,**

Mailing Address 812 LOS OLIVOS DR

City  
SAN GABRIELState  
CAZip Code  
91775-1627FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676175

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NAVA, CARLOS, , MR.,**

Mailing Address 812 LOS OLIVOS DR

City  
SAN GABRIELState  
CAZip Code  
91775-1627FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715987

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 211 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NAVA, CARLOS, , MR.,**

Mailing Address 812 LOS OLIVOS DR

City  
SAN GABRIELState  
CAZip Code  
91775-1627FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721840

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEAL, LONNIE, DAVID, ,**

Mailing Address 7128 NORTH 63DRIVE

City  
GLENDALEState  
AZZip Code  
85301-2385FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27723340

Amount of Each Receipt this Period

60.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEHRING, ANDREW, , ,**

Mailing Address 425 MASSACHUSETTS AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-2609FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VOGEL GROUPOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27671147

Amount of Each Receipt this Period

1200.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1310.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 212 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEIMEYER, DAVID, E., ,**

Mailing Address 9026 HAAF RD

City  
FOGELSVILLEState  
PAZip Code  
18051-1717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27678016**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, BRENDA, , ,**

Mailing Address 1578 NORTH 225 WEST

City  
HARRISVILLEState  
UTZip Code  
84404-2727FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RIDGELINE REALTYOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27748051**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, J., SCOTT, ,**

Mailing Address 5540 WEST EL PASO AVENUE

City  
FRESNOState  
CAZip Code  
93722-2788FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681431**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

610.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 213 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NGUYEN, TOAN, , ,**

Mailing Address 472 ILCREST DR.

City  
HOUSTONState  
TXZip Code  
77042-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676467

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NICKSON, RICHARD, , MR.,**Mailing Address 11153 BEATRICE CT  
ANALOG DEVICES INCCity  
LITTLETONState  
COZip Code  
80125-1826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727397

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NIEMANN, NANCY, , ,**

Mailing Address 18 DOGWOOD RD.

City  
MORRIS PLAINSState  
NJZip Code  
07950-1919FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

853.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727478

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

675.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 214 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOLT, EDWARD, S., MR.,**

Mailing Address 4401 KY 910

City  
LIBERTYState  
KYZip Code  
42539-7998FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27723030

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOWAKOWSKI, THOMAS, , ,**

Mailing Address 7 CHESTNUT LANE

City  
NEW HOPEState  
PAZip Code  
18938-9206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

UMS INC.

Occupation (for Individual)

SALES MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736931

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUGENT SMITH, LYNDIA, , ,**

Mailing Address 4608 FOLSE DR.

City  
METAIRIEState  
LAZip Code  
70006-1231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

KELLER WILLIAMS REALTY

Occupation (for Individual)

REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748057

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 215 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNNALLY, SONDR A., ,**Mailing Address 800 RICE VALLEY RD N  
APT F15City  
TUSCALOOSAState  
ALZip Code  
35406-1616FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718974

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O'ROURKE, DON, , , SR.**

Mailing Address 909 ROPER DRIVE

City  
SCOTTState  
LAZip Code  
70583-4701FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.74

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654209

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'ROURKE, DON, , , SR.**

Mailing Address 909 ROPER DRIVE

City  
SCOTTState  
LAZip Code  
70583-4701FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.74

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27723255

Amount of Each Receipt this Period

80.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

615.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLSON, JAMES, K., MR.,**

Mailing Address 515 16TH AVE N

City  
ONALASKAState  
WIZip Code  
54650-2415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.44

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27676791**

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, JAMES, K., MR.,**

Mailing Address 515 16TH AVE N

City  
ONALASKAState  
WIZip Code  
54650-2415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.44

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27677220**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLSON, JAMES, K., MR.,**

Mailing Address 515 16TH AVE N

City  
ONALASKAState  
WIZip Code  
54650-2415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

421.44

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27695890**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 217 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLSON, JAMES, K., MR.,**

Mailing Address 515 16TH AVE N

City  
ONALASKAState  
WIZip Code  
54650-2415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.44

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726623

Amount of Each Receipt this Period

60.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, JAMES, K., MR.,**

Mailing Address 515 16TH AVE N

City  
ONALASKAState  
WIZip Code  
54650-2415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.44

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726724

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OVERSTREET, REBECCA, M., ,**

Mailing Address 3263 GONDOLA DR.

City  
LEXINGTONState  
KYZip Code  
40513-1065FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676395

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 218 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OWENS, VIRGINIA, L., MRS.,**Mailing Address 2010 W AVENUE K  
PMB 624City  
LANCASTERState  
CAZip Code  
93536-5229FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647956**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OWENS, VIRGINIA, L., MRS.,**Mailing Address 2010 W AVENUE K  
PMB 624City  
LANCASTERState  
CAZip Code  
93536-5229FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698621**

Amount of Each Receipt this Period

190.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OXFORD, LARRY, B., MR.,**Mailing Address 18211 BULVERDE RD  
#8307 8307City  
SAN ANTONIOState  
TXZip Code  
78259-3716FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650411**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1240.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 219 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAGE, STEVEN, , ,**

Mailing Address PO BOX 324

City  
NASHUAState  
MTZip Code  
59248-0324FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27685099

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARK, WILLIAM, M., MR.,**

Mailing Address PO BOX 718

City  
SKIATOOKState  
OKZip Code  
74070-0718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677496

Amount of Each Receipt this Period

750.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKER, ROBERT, E., MR.,**

Mailing Address PO BOX 9609

City  
CORPUS CHRISTIState  
TXZip Code  
78469-9609FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EMCOR INDUSTRIAL SERVICESOccupation (for Individual)  
VICE CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27695964

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6750.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 220 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARKS, MARTHA, , MS.,**

Mailing Address 2815 SIMONDALE DR.

City  
FORT WORTHState  
TXZip Code  
76109-1255FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

895.70

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653692

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAULING, DAVID, , MR.,**

Mailing Address 35040 PATIENCE CT.

City  
ROUND HILLState  
VAZip Code  
20141-2578FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722246

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, GORDON, A., MR.,**

Mailing Address 3232 LAFAYETTE DR.

City  
TRENTONState  
MIZip Code  
48183-3477FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

211.10

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671712

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

700.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 221 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PEDERSON, DAVID, A., MR.,**

Mailing Address P.O. BOX 250

City  
ROLLAState  
NDZip Code  
58367-0250FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27676377**

Amount of Each Receipt this Period

550.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PENIN, CARLOS, A., ,**

Mailing Address 343 ALMERIA AVENUE

City  
CORAL GABLESState  
FLZip Code  
33134-5811FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CAP GOVERNMENTOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27718875**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERCIFUL, MICHAEL, , ,**

Mailing Address 38178 WALLACE ROAD

City  
HEMETState  
CAZip Code  
92544-9290FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SOCAL REALTORS AND ASSOCIATESOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27748038**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3050.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 222 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PERRIELLO, GINA ANN, , ,**

Mailing Address 99 MAMARONECK AVENUE, SUITE 2

City  
WHITE PLAINSState  
NYZip Code  
10601-5212FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DELUCAOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715731

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETERSON, ALYCE, H., ,**

Mailing Address 305 KECK LANE

City  
BUCHANANState  
TNZip Code  
38222-4257FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654556

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERSON, DWIGHT, A., MR.,**

Mailing Address 5 WOODHILL LN

City  
SAINT PAULState  
MNZip Code  
55127-2140FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727553

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 223 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETERS, HOLLY, , ,**

Mailing Address 257 AVENIDA ATEZADA

City  
REDONDO BEACHState  
CAZip Code  
90277-6765FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27658020**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETERS, MARK, L., MR.,**

Mailing Address 6590 N ALBERTA CT

City  
MILWAUKEEState  
WIZip Code  
53217-4021FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27677002**

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PHILLEY, CATHRYN, K., MRS.,**

Mailing Address 4004 MARQUETTE ST

City  
DALLASState  
TXZip Code  
75225-5433FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27654275**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2050.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 224 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PHILLIPS, CLARENCE, A., MR.,**

Mailing Address 787 S EUCLID AVE.

City  
PASADENAState  
CAZip Code  
91106-3770FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27696309**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIGNOTTI, DENNIS, , MR.,**

Mailing Address 105 PRAIRIE DR

City  
LEXINGTONState  
ILZip Code  
61753-4508FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.44

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27654127**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIGNOTTI, DENNIS, , MR.,**

Mailing Address 105 PRAIRIE DR

City  
LEXINGTONState  
ILZip Code  
61753-4508FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.44

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721713**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 225 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIGNOTTI, DENNIS, , MR.,**

Mailing Address 105 PRAIRIE DR

City  
LEXINGTONState  
ILZip Code  
61753-4508FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721725

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POCHE, ADOLPH, , ,**

Mailing Address 24102 SHANNONDELL DR

City  
NORRISTOWNState  
PAZip Code  
19403-5623FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27648081

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POCHE, ADOLPH, , ,**

Mailing Address 24102 SHANNONDELL DR

City  
NORRISTOWNState  
PAZip Code  
19403-5623FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27723280

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 226 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POGUE, RICHARD, W., MR.,**

Mailing Address 901 LAKESIDE AVE E

City  
CLEVELANDState  
OHZip Code  
44114-1163FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JONES DAYOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741270

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POWELL, DAVID, E., MR.,**

Mailing Address 16 W 16TH ST

City  
OCEAN CITYState  
NJZip Code  
08226-2914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OCEAN CITY SCHOOLSOccupation (for Individual)  
EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706826

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POWERS, DAVID, D., MR.,**

Mailing Address 296 BEE TREE RD

City  
LANSINGState  
NCZip Code  
28643-9220FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726778

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1800.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 227 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRESLEY, JUANITA, , MS.,**

Mailing Address 4115 E. CLOCKTOWER LANE, APT. 246

City  
MERIDIANState  
IDZip Code  
83642-4742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.53

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681722

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRESLEY, JUANITA, , MS.,**

Mailing Address 4115 E. CLOCKTOWER LANE, APT. 246

City  
MERIDIANState  
IDZip Code  
83642-4742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.53

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27731290

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRETTY, RENAE, , ,**

Mailing Address 5806 DEVONWOOD ST

City  
SCHERTZState  
TXZip Code  
78108-2406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CLASSIC REALTYOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748061

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

575.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 228 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRICE, DELORES, , ,**

Mailing Address 9215 SE 29TH AVE

City  
PORTLANDState  
ORZip Code  
97222-6449FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698910

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRIESTER, WILLIAM, D., ,**Mailing Address 1440 YORK AVE  
OFC P6City  
NEW YORKState  
NYZip Code  
10075-2577FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653910

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PURDON, THOMAS, F., MR.,**

Mailing Address 8550 W CONTINENTAL DR

City  
PEORIAState  
AZZip Code  
85382-2702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730900

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

775.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 229 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PYLE, DON, , ,**

Mailing Address 4 BLAISDELL ST

City  
AUGUSTAState  
MEZip Code  
04330-6902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707683

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUAIFE, DARLENE, M., MS.,**

Mailing Address PO BOX 400

City  
GRAND MARAISState  
MNZip Code  
55604-0400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741447

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAGUS, JOE, P., ,**

Mailing Address 2216 RED MILE RD

City  
MURFREESBOROState  
TNZip Code  
37127-6914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677226

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

320.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 230 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAGUS, JOE, P., ,**

Mailing Address 2216 RED MILE RD

City  
MURFREESBOROState  
TNZip Code  
37127-6914FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718897

Amount of Each Receipt this Period

45.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAGUS, JOE, P., ,**

Mailing Address 2216 RED MILE RD

City  
MURFREESBOROState  
TNZip Code  
37127-6914FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726698

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAMEY, DENISE, , ,**

Mailing Address 717 GOLF VIEW DRIVE

City  
CROZETState  
VAZip Code  
22932-1536FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

LONG &amp; FOSTER - CHARLOTTESVILL

Occupation (for Individual)

REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748065

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

620.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 231 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RANKIN, THOMAS, EDWIN, MR.,**Mailing Address 8090 FRANKFORD RD  
APT 415City  
DALLASState  
TXZip Code  
75252-0024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27699175**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REALI, FRAN, , ,**

Mailing Address 1958 VICTORY BLVD

City  
STATEN ISLANDState  
NYZip Code  
10314-3520FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SAFARI REALTYOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27748042**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REAMS, GLORIA, , ,**

Mailing Address 9060 SILVER STAR AVE

City  
DESERT HOT SPRINGSState  
CAZip Code  
92240-7723FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.50

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27654538**

Amount of Each Receipt this Period

65.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

665.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 232 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REDFERN, KENNETH, C., ,**Mailing Address 1001 S CAPITAL OF TEXAS HWY  
BLDG M STE 100City  
WEST LAKE HILLSState  
TXZip Code  
78746-6450FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REDFERN MGMT CORPOccupation (for Individual)  
BLDG MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741430

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REED, IVAN, D., MR., JR.**

Mailing Address 306 E 19TH ST

City  
SPENCERState  
IAZip Code  
51301-2339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727495

Amount of Each Receipt this Period

600.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REINECKE, SANDRA, , ,**

Mailing Address 102 BROOKSBY VILLAGE DR. UNIT 226

City  
PEABODYState  
MAZip Code  
01960-1481FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650363

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 233 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REISING, JOHN, , ,**

Mailing Address 1155 F ST NW

City  
WASHINGTONState  
DCZip Code  
20004-1312FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

BROWNSTEIN HYATT FARBER SCHRECK, LLP

Occupation (for Individual)

POLICY DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27650269**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RESSLER, HAROLD, , MR.,**

Mailing Address 5383 E RURAL RIDGE CIR

City  
ANAHEIMState  
CAZip Code  
92807-4632FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27722781**

Amount of Each Receipt this Period

105.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REYNOLDS, RONALD, LEE, ,**

Mailing Address 41 BIG OAK DR.

City  
LINDENState  
VAZip Code  
22642-5606FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27723140**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

905.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 234 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICH, RONALD, , ,**

Mailing Address 4904 LONG MEADOW DR

City  
LEESBURGState  
FLZip Code  
34748-7864FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27704523

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIESING, KATHLEEN, M., MS.,**

Mailing Address 454 WOODLAWN AVE

City  
GLENCOEState  
ILZip Code  
60022-2174FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27704525

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RISKU, LARRY, , ,**

Mailing Address 516 POPLAR ST

City  
WEST NEWTONState  
PAZip Code  
15089-1259FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27651134

Amount of Each Receipt this Period

300.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

800.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 235 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RITTER, ANN, W., MS.,**

Mailing Address 2551 PALOMINO DR.

City  
CAPE GIRARDEAUState  
MOZip Code  
63701-1958FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1805.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650384

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RITTER, ANN, W., MS.,**

Mailing Address 2551 PALOMINO DR.

City  
CAPE GIRARDEAUState  
MOZip Code  
63701-1958FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1805.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654283

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, KEN, , MR.,**

Mailing Address 32078 S AGARITA DR.

City  
ORACLEState  
AZZip Code  
85623-2066FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726470

Amount of Each Receipt this Period

265.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

865.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 236 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBY, JOANNE, E., ,**

Mailing Address 888 MICHELE CIR

City  
DUNEDINState  
FLZip Code  
34698-6130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706976

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROCHE, KAREN, , ,**

Mailing Address 105 WOODRIDGE RD

City  
DUBLINState  
GAZip Code  
31021-2929FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROCHE FARM AND GARDENOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727616

Amount of Each Receipt this Period

600.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, NORMA, JEAN, MS.,**

Mailing Address 3 SMITH GRAVEYARD RD

City  
ASHEVILLEState  
NCZip Code  
28806-9655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27672361

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►

925.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 237 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, NORMA, JEAN, MS.,**

Mailing Address 3 SMITH GRAVEYARD RD

City  
ASHEVILLEState  
NCZip Code  
28806-9655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27723012

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROGERS, NORMA, JEAN, MS.,**

Mailing Address 3 SMITH GRAVEYARD RD

City  
ASHEVILLEState  
NCZip Code  
28806-9655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727410

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROHNER, JOSEPH, , ,**

Mailing Address 4107 ECHO GLEN DRIVE

City  
DALLASState  
TXZip Code  
75244-7324FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27730790

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 238 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROMERO, TERESA, G., MS.,**Mailing Address 1340 N JUNE ST  
APT 14City  
LOS ANGELESState  
CAZip Code  
90028-7843FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

790.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721736

Amount of Each Receipt this Period

395.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROTTHOFF, ELEANOR, R., MS.,**Mailing Address 9306 GREAT HILLS TRL  
UNIT 35City  
AUSTINState  
TXZip Code  
78759-7123FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657930

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROTTHOFF, ELEANOR, R., MS.,**Mailing Address 9306 GREAT HILLS TRL  
UNIT 35City  
AUSTINState  
TXZip Code  
78759-7123FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677627

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

695.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 239 OF 6441  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROTTHOFF, ELEANOR, R., MS.,**Mailing Address 9306 GREAT HILLS TRL  
UNIT 35City  
AUSTINState  
TXZip Code  
78759-7123FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707270

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUCKRIGEL, ROBERT, J., ,**Mailing Address 1000 GALEENER ST  
APT 9City  
VIENNAState  
ILZip Code  
62995-1678FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650701

Amount of Each Receipt this Period

600.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653901

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 240 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUGGIERI, THOMAS, , MR.,**

Mailing Address 115 HAWTHORNE LN

City  
PHOENIXVILLEState  
PAZip Code  
19460-2731FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27672158**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUMMEL, THOMAS, E., MR.,**Mailing Address 333 ELMWOOD AVE  
STE 1City  
MAPLEWOODState  
NJZip Code  
07040-2491FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27677182**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUNALDUE, DONALD, , MR.,**

Mailing Address 32 PLANTATION DR.

City  
SOUTHERN PINESState  
NCZip Code  
28387-2967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

462.60

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653699**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

375.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 241 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVER

State  
NJ

Zip Code  
08882-1908

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

02 / 11 / 2025

Transaction ID : SA11A.27677756

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVER

State  
NJ

Zip Code  
08882-1908

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

02 / 24 / 2025

Transaction ID : SA11A.27718934

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINE

State  
CA

Zip Code  
92604-2216

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.83

Date of Receipt

02 / 14 / 2025

Transaction ID : SA11A.27695918

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 242 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUTLEDGE, PRESTON, , ,**Mailing Address 1155 F ST NW  
12TH FLOORCity  
WASHINGTONState  
DCZip Code  
20004-1312FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RUTLEDGE POLICY GROUPOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27667475**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RYAN, LORETTA, N., MS.,**

Mailing Address 32808 OUTLAND TRL

City  
BINGHAM FARMSState  
MIZip Code  
48025-2552FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27667893**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SABOL, JEANETTE, I., ,**

Mailing Address 2380 CHESTER HEIGHTS CT

City  
HENDERSONState  
NVZip Code  
89052-8737FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671397**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

900.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 243 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAGALE, MOEIFAGA, , ,**

Mailing Address 7356 TOOMA STREET

City  
SAN DIEGOState  
CAZip Code  
92139-2939FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.89

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707489

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAKALDASIS, GEORGE, J., MR.,**

Mailing Address 1379 LYON CT

City  
LIVERMOREState  
CAZip Code  
94551-1952FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LAWRENCE LIVERMORE NATIONAL SECURITY LOccupation (for Individual)  
EXECUTIVE STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654372

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAMPLE, LESLIE, , ,**

Mailing Address 248 ELMWOOD DRIVE

City  
HOT SPRINGSState  
ARZip Code  
71901-6733FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COLDWELL BANKER RPMOccupation (for Individual)  
EXECUTIVE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715714

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1535.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 244 OF 6441  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAND, GEORGE, , ,**

Mailing Address 2512 NW 24TH STREET

City  
CAPE CORALState  
FLZip Code  
33993-8234FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REMAXOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748045

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, MELVIN, , ,**

Mailing Address 4039 MAYFLOWER CT SW

City  
LILBURNState  
GAZip Code  
30047-3206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.60

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722576

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAULSBERRY, GAREN, , ,**

Mailing Address 4440 LONESOME PINE ROAD

City  
LAS CRUCESState  
NMZip Code  
88007-4566FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PERATONOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27682044

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

575.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 245 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAVAGE, PERRY, L., DR.,**

Mailing Address 3815 RIVER VIEW CIR

City  
MOUNTAIN BRKState  
ALZip Code  
35243-4801FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650583**

Amount of Each Receipt this Period

600.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAVAGE, PERRY, L., DR.,**

Mailing Address 3815 RIVER VIEW CIR

City  
MOUNTAIN BRKState  
ALZip Code  
35243-4801FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27722850**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAVAGE, PERRY, L., DR.,**

Mailing Address 3815 RIVER VIEW CIR

City  
MOUNTAIN BRKState  
ALZip Code  
35243-4801FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27731397**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 246 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHAEFFER, HEIDI, , ,**Mailing Address 2400 DC COUNTRY CLUB BLVD  
701City  
DEERFIELD BEACHState  
FLZip Code  
33442-1207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UMOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27685048**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHATTYN, JOHN, , MR.,**

Mailing Address 129 CROCKETT DR.

City  
KERRVILLEState  
TXZip Code  
78028-8114FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.14

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27696337**

Amount of Each Receipt this Period

130.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHATTYN, JOHN, , MR.,**

Mailing Address 129 CROCKETT DR.

City  
KERRVILLEState  
TXZip Code  
78028-8114FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1214.14

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27727445**

Amount of Each Receipt this Period

125.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2255.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 247 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHATTYN, JOHN, , MR.,**

Mailing Address 129 CROCKETT DR.

City  
KERRVILLEState  
TXZip Code  
78028-8114FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.14

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27730829

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHELL, JOHN, A., MR.,**

Mailing Address 5112 PINE RIVER TRL

City  
CASTLE ROCKState  
COZip Code  
80108-8839FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722580

Amount of Each Receipt this Period

675.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHMIDT, BARBARA, , ,**Mailing Address 728 E PLEASANT ST  
APT 1610City  
MILWAUKEEState  
WIZip Code  
53202-4630FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ASCENSIONOccupation (for Individual)  
MEDICAL ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

443.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706938

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

720.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 248 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHMIDT, JOYCE, , ,**

Mailing Address 5530 E CACTUS WREN ST

City  
APACHE JUNCTIONState  
AZZip Code  
85119-7589FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650300**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHMIED, PAUL, F., MR.,**

Mailing Address 4 SENECA AVE

City  
GENESEOState  
NYZip Code  
14454-9508FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27741780**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHNEEBECK, ROBERT, W., MR.,**

Mailing Address 741 N MANASOTA KEY RD

City  
ENGLEWOODState  
FLZip Code  
34223-9758FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CONTINENTAL NATL. INDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27727609**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 249 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHRAM, CHARLES, , ,**

Mailing Address 14816 WEST HURON DRIVE

City  
SUN CITY WESTState  
AZZip Code  
85375-5988FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.52

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722770

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHWARZMAN, CHRISTINE, H., MRS.,**

Mailing Address 740 PARK AVE

City  
NEW YORKState  
NYZip Code  
10021-4251FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27715740

Amount of Each Receipt this Period

44300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHWAB, LOWELL, , ,**

Mailing Address 6255 MOHAWK DRIVE

City  
HAMELState  
MNZip Code  
55340-9708FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650234

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

44450.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 250 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHWARTZ, RONALD, W., MR.,**

Mailing Address 333 CUMNOR AVE

City  
GLEN ELLYNState  
ILZip Code  
60137-4839FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677905

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHWARZMAN, STEPHEN, A., MR.,**Mailing Address 345 PARK AVENUE  
44TH FLOORCity  
NEW YORKState  
NYZip Code  
10154-0004FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BLACKSTONE GROUPOccupation (for Individual)  
CEO & CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27715739

Amount of Each Receipt this Period

44300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHWARTZ, THOMAS, , ,**

Mailing Address 6046 22ND RD N

City  
ARLINGTONState  
VAZip Code  
22205-3410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653950

Amount of Each Receipt this Period

90.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

44790.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 251 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHWARTZ, THOMAS, , ,**

Mailing Address 6046 22ND RD N

City  
ARLINGTONState  
VAZip Code  
22205-3410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726338

Amount of Each Receipt this Period

90.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650840

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27696168

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 252 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741493

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741778

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741779

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 253 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, DELORES, H., MRS.,**

Mailing Address PO BOX 853

City  
PRAIRIE CITYState  
ORZip Code  
97869-0853FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704541

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEWELL, DAVID, H., ,**

Mailing Address 1723 ORCHARD CT

City  
KINGSPORTState  
TNZip Code  
37660-4521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676300

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHAFFER, THOMAS, G., MR., JR.**Mailing Address 20 DEVONWOOD DR  
APT 173ECity  
FARMINGTONState  
CTZip Code  
06032-1470FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTHOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701955

Amount of Each Receipt this Period

140.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

840.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 254 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHANNAHAN, DASHIELL, J., MR.,**

Mailing Address 19000 HERMITAGE RD

City  
ONANCOCKState  
VAZip Code  
23417-2012FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27707054**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHEKELL, LAWRENCE, , ,**

Mailing Address 1734 NW FAREWELL DR

City  
BENDState  
ORZip Code  
97703-5692FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27702239**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHEPPARD, DALEN, , ,**Mailing Address 545 W HACIENDA AVE  
APT 110City  
CAMPBELLState  
CAZip Code  
95008-6528FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27741537**

Amount of Each Receipt this Period

280.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1080.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 255 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHERMAN, ETHEL, J., MS.,**

Mailing Address 408 BARBEAU ST

City  
SAULT SAINTE MARIEState  
MIZip Code  
49783-2406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671188

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOULTS, SANDRA, J., MS.,**

Mailing Address 1701 W TRAVELAIR WAY

City  
TUCSONState  
AZZip Code  
85755-9432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650930

Amount of Each Receipt this Period

225.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHUFORD, JACOB, L., ,**

Mailing Address 255 TOMBEE LN

City  
COLUMBIAState  
SCZip Code  
29209-0804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

608.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27695517

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

575.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 256 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** SHUFORD, JACOB, L., ,

Mailing Address 255 TOMBEE LN

City  
COLUMBIAState  
SCZip Code  
29209-0804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27695923

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** SIEGEL, PENN, P., MR.,

Mailing Address 9686 N EASY ST

City  
HAYDENState  
IDZip Code  
83835-9526FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27699205

Amount of Each Receipt this Period

1050.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** SIGMUND, KATHY, L., ,

Mailing Address 143 WINDSOR DR. N

City  
CODYState  
WYZip Code  
82414-5702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

352.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27699166

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1275.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 257 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINCLAIR, JOHN, , ,**

Mailing Address 14 CROWN POINT CIR.

City  
MERRIMACKState  
NHZip Code  
03054-4900FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722711

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SINCLAIR, WILLIAM, , ,**

Mailing Address 816 AGAPE CIR

City  
ROCKWALLState  
TXZip Code  
75087-3406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721801

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SINDT, ROBERT, H., MR.,**

Mailing Address 7337 BROWNS BRIDGE RD

City  
FULTONState  
MDZip Code  
20759-9743FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676473

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 258 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINGER, PAUL, ELLIOT, MR.,**Mailing Address 40 W 57TH ST, 30TH FLOOR  
BOX 150City  
NEW YORKState  
NYZip Code  
10019-4038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ELLIOTT MANAGEMENT CORPORATIONOccupation (for Individual)  
FOUNDER & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27715751**

Amount of Each Receipt this Period

44300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, DONNA, , ,**

Mailing Address 72 HAZEL SPUR RD

City  
LIVINGSTN MNRState  
NYZip Code  
12758-6411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681791**

Amount of Each Receipt this Period

900.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, DONNA, , ,**

Mailing Address 206 WEST CHURCH STREET

City  
GREERState  
SCZip Code  
29650-1910FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BHHS C DAN JOYNER - GARLINGTONOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27748043**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 259 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, GEORGE, , ,**

Mailing Address 7301 NIQUEL PL NW

City  
ALBUQUERQUEState  
NMZip Code  
87120-1580FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

COMMERCIAL ASSOCIATION OF REALTORS NEW

Occupation (for Individual)

ASSOCIATION MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715732

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, GINGER, M., MS.,**

Mailing Address 2348 TRAILWOOD DR

City  
CANTONMENTState  
FLZip Code  
32533-6709FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718963

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, JIM, , ,**

Mailing Address PO BOX 305

City  
ROUND ROCKState  
TXZip Code  
78680-0305FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

THE PROPERTY MANAGEMENT CO.

Occupation (for Individual)

REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748056

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 260 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, LARON, L., ,**

Mailing Address 185 LAGUNA ST

City  
LOS ALAMOSState  
NMZip Code  
87544-2603FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657880

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, LARON, L., ,**

Mailing Address 185 LAGUNA ST

City  
LOS ALAMOSState  
NMZip Code  
87544-2603FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707036

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, SHERMAN, L., MR.,**

Mailing Address 15011 SWEAT LOOP RD

City  
WIMAUMAState  
FLZip Code  
33598-5007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647990

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

525.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 261 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, SHERMAN, L., MR.,**

Mailing Address 15011 SWEAT LOOP RD

City  
WIMAUMAState  
FLZip Code  
33598-5007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27696117

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SNEDDEN, ALBERT, , ,**

Mailing Address 1165 FAIRFIELD LN

City  
SEBASTIANState  
FLZip Code  
32958-5965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.05

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27722900

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SORENSEN, MONTE, , ,**

Mailing Address 1946 DEERWOOD TRL

City  
KRONENWETTERState  
WIZip Code  
54455-8071FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

496.14

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27699090

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

275.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 262 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOUSSAN, ALBERT, , MR.,**Mailing Address 18975 COLLINS AVE  
UNIT 2200City  
SUNNY ISLES BEACHState  
FLZip Code  
33160-2361FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681622**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698858**

Amount of Each Receipt this Period

55.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718884**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

340.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 263 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPECTOR, ARTHUR, , ,**Mailing Address 4401 COLLINS AVENUE  
2-1714City  
MIAMI BEACHState  
FLZip Code  
33140-3227FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27695408**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPENCER, GLORIA, Y., ,**

Mailing Address 21712 BEAUFORD LN

City  
NORTHVILLEState  
MIZip Code  
48167-9083FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650401**

Amount of Each Receipt this Period

225.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPONG, RICHARD, CARL, MR.,**

Mailing Address 2100 W LITTLETON BLVD. APT. 102

City  
LITTLETONState  
COZip Code  
80120-2033FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657970**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2255.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 264 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPONG, RICHARD, CARL, MR.,**

Mailing Address 2100 W LITTLETON BLVD. APT. 102

City  
LITTLETONState  
COZip Code  
80120-2033FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726927

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPREEN, JOYCE, , MS.,**

Mailing Address 502 MCCARVER DR.

City  
BALLINGERState  
TXZip Code  
76821-5022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676024

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STAHL, DIANE, , ,**

Mailing Address 4856 E SANDWICH RD.

City  
SANDWICHState  
ILZip Code  
60548-4046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27678039

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 265 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STALCUP, NANCY, C., MS.,**

Mailing Address 2461 WEATHERFORD CT

City  
MARIETTAState  
GAZip Code  
30068-3475FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647931

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEARNS, SUSAN, , MRS.,**

Mailing Address 11 BARBIZON CT.

City

W. LONG BRANCH

State

NJ

Zip Code

07764-1273

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

790.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27685242

Amount of Each Receipt this Period

790.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEC, FRANK, F., ,**

Mailing Address 406 LYNN GREMER CT

City

DOWNERS GROVE

State

IL

Zip Code

60516-1500

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657859

Amount of Each Receipt this Period

400.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1390.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 266 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEIGENBERGER, DENNIS, , ,**

Mailing Address P.O. BOX 438

City  
FISH CREEKState  
WIZip Code  
54212-0438FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27651161

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEINKE, DELORIS, , ,**

Mailing Address P.O. BOX 35

City  
GOVEState  
KSZip Code  
67736-0035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27695474

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEINBACK, DOUGLAS, D., MR., JR.**

Mailing Address 2985 COUNTY ROAD B

City  
PLATTEVILLEState  
WIZip Code  
53818-8911FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741755

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 267 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEIN, HARRIS, , ,**

Mailing Address 2 TODD COURT

City  
HUNTINGTON STATIONState  
NYZip Code  
11746-4224FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647790**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEIN, MARK, , MR.,**

Mailing Address 25 LOVELL RD

City  
NEW ROCHELLEState  
NYZip Code  
10804-2114FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IMPOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653932**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STENGER, GLENDA, , ,**

Mailing Address 331 GREENWAY CIR

City  
GREENCASTLEState  
PAZip Code  
17225-9203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653845**

Amount of Each Receipt this Period

225.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

555.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 268 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEPHENSON, MARK, , MR.,**

Mailing Address PO BOX 223

City  
FRANKLINState  
ILZip Code  
62638-0223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REYNOLDS GROUPOccupation (for Individual)  
FACTORY ELECTRICIAN MECHANIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677738

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681315

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, WILLIAM, T., MR.,**Mailing Address 3550 S BOND AVE  
UNIT 2701City  
PORTLANDState  
ORZip Code  
97239-4729FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653922

Amount of Each Receipt this Period

350.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 269 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEWART, SCOTT, ENGLE, ,**

Mailing Address 4601 LAFAYETTE AVE

City  
FORT WORTHState  
TXZip Code  
76107-3721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEWART PLLCOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1180.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676776

Amount of Each Receipt this Period

190.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEWART, SCOTT, ENGLE, ,**

Mailing Address 4601 LAFAYETTE AVE

City  
FORT WORTHState  
TXZip Code  
76107-3721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEWART PLLCOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1180.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727090

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEWART, SCOTT, ENGLE, ,**

Mailing Address 4601 LAFAYETTE AVE

City  
FORT WORTHState  
TXZip Code  
76107-3721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEWART PLLCOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1180.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741800

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

540.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 270 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STINSON, BRENDA, A., MRS.,**

Mailing Address 293 HAVERHILL ST

City  
READINGState  
MAZip Code  
01867-1809FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27695741

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOCKTON, DAVID, L., ,**Mailing Address 301 LINDEN PONDS WAY  
UNIT 203City  
HINGHAMState  
MAZip Code  
02043-3734FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741268

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRAUTZ, ETHEL, , MS.,**

Mailing Address 61 WALNUT ST

City  
RIVER ROUGEState  
MIZip Code  
48218-1524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671614

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 271 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRAUTZ, ETHEL, , MS.,**

Mailing Address 61 WALNUT ST

City  
RIVER ROUGEState  
MIZip Code  
48218-1524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726994

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STREET, ROY, L., MR.,**

Mailing Address 475 GENTRY WAY

City  
RENOState  
NVZip Code  
89502-4610FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676045

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUHR, J., NICHOLAS, MR.,**

Mailing Address 2006 YELLOWSTONE DR

City  
INDIAN LANDState  
SCZip Code  
29707-3536FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

276.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657829

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

350.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 272 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SULLIVAN, BEVERLY, , MS.,**Mailing Address 1325 COCONINO RD  
UNIT 208City  
AMESState  
IAZip Code  
50014-7921FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653948**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SULLIVAN, BEVERLY, , MS.,**Mailing Address 1325 COCONINO RD  
UNIT 208City  
AMESState  
IAZip Code  
50014-7921FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27707957**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SULLIVAN, BEVERLY, , MS.,**Mailing Address 1325 COCONINO RD  
UNIT 208City  
AMESState  
IAZip Code  
50014-7921FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730881**

Amount of Each Receipt this Period

140.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

340.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 273 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SULLIVAN, BEVERLY, , MS.,**Mailing Address 1325 COCONINO RD  
UNIT 208City  
AMESState  
IAZip Code  
50014-7921FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730882**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SULLIVAN, BEVERLY, , MS.,**Mailing Address 1325 COCONINO RD  
UNIT 208City  
AMESState  
IAZip Code  
50014-7921FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730883**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SULLIVAN, CINDY, M., ,**

Mailing Address 575 SIMPSON HWY 540

City  
MENDENHALLState  
MSZip Code  
39114-9065FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.51

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27676741**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►

175.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 274 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUNDERMAN, JAMES, G., DR.,**

Mailing Address 43721 PORT MARIA RD

City  
BERMUDA DUNESState  
CAZip Code  
92203-1637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676147

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUNDERMAN, JAMES, G., DR.,**

Mailing Address 43721 PORT MARIA RD

City  
BERMUDA DUNESState  
CAZip Code  
92203-1637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27708025

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SVENSSON, MARION, , ,**

Mailing Address 7793 BRIGHAM RD.

City  
GATES MILLSState  
OHZip Code  
44040-9707FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27695921

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

450.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 275 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SWIHART, DONALD, , ,**

Mailing Address 13919 OLD TROY PIKE

City  
SAINT PARISState  
OHZip Code  
43072-9524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650858

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SYNNOTT, DONNA, , ,**

Mailing Address 326 COUNCIL BLUFF PKWY

City  
MURFREESBOROState  
TNZip Code  
37127-8317FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727173

Amount of Each Receipt this Period

205.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TALLEY, WENDELL, LEE, MR.,**Mailing Address 6043 TALLEY RD  
PO BOX 157City  
STANFIELDState  
NCZip Code  
28163-7614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650996

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

655.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 276 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TALLEY, WENDELL, LEE, MR.,**Mailing Address 6043 TALLEY RD  
PO BOX 157City  
STANFIELDState  
NCZip Code  
28163-7614FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27722982**

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAN, BENITO, H., ,**

Mailing Address 6 MEADOWVIEW RD

City  
MILLINGTONState  
NJZip Code  
07946-1349FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27741673**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TANZER, THEODORE, , ,**

Mailing Address 3128 N POLLARD ST

City  
ARLINGTONState  
VAZip Code  
22207-4142FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

AIRBNB, INC.

Occupation (for Individual)

PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27715761**

Amount of Each Receipt this Period

228.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

678.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 277 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYENAKA, RITA, , ,**

Mailing Address 25931 PORTAFINO DRIVE

City  
MISSION VIEJOState  
CAZip Code  
92691-5715FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COAST TO CANYON REAL ESTATEOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715727

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULAState  
MTZip Code  
59804-5849FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706874

Amount of Each Receipt this Period

65.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, PHILIP, E., DR.,**

Mailing Address 3200 NANCY JEAN RD

City  
GREENSBOROState  
NCZip Code  
27406-9635FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHILIP E TAYLOR, DDSOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710434

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

615.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 278 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, PHILIP, E., DR.,**

Mailing Address 3200 NANCY JEAN RD

City  
GREENSBOROState  
NCZip Code  
27406-9635FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PHILIP E TAYLOR, DDSOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730784**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, RICHARD, M., MR.,**

Mailing Address 3456 FOX HOLLOW COURT

City  
MARIETTAState  
GAZip Code  
30068-2402FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27707532**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, ROBERT, V., DR., JR.**

Mailing Address 9708 CONCORD RD

City  
BRENTWOODState  
TNZip Code  
37027-8987FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TENNESSEE DEPT OF HEALTHOccupation (for Individual)  
EPIDEMIOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27707625**

Amount of Each Receipt this Period

235.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

385.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 279 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TEDDER, ANTHONY, G., ,

Mailing Address 379 LITTLE COVE RD

City  
SYLVAState  
NCZip Code  
28779-7096FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707300

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TEED, ELIZABETH, , ,

Mailing Address 1301 SOUTH JOYCE STREET  
APT. 4330City  
ARLINGTONState  
VAZip Code  
22202-2083FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNERSTONE GOVERNMENT AFFAIRSOccupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.68

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27721437

Amount of Each Receipt this Period

208.34

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TEGELER, LARRY, , MR.,

Mailing Address 53919 HWY 275

City  
MEADOW GROVEState  
NEZip Code  
68752-4093FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706838

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

758.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 280 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THIEMANN, OTTO, , MR.,**

Mailing Address 7208 FLINTROCK RD

City  
NORTH LITTLE ROCKState  
ARZip Code  
72116-4302FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27707783**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMAS, DEAN, , ,**

Mailing Address 16 HINCHMAN AVE

City  
DENVERState  
NJZip Code  
07834-2111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NORMAN DEAN HOME FOR SERVICESOccupation (for Individual)  
FUNERAL DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27677013**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANEState  
UTZip Code  
84737-1405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

815.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721665**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

475.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 281 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TOPKIS, BARBARA, S., MRS.,**

Mailing Address 1753 SAN YSIDRO DR

City  
BEVERLY HILLSState  
CAZip Code  
90210-2114FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27707061**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TOWERS, JONATHAN, , ,**Mailing Address 425 MASSACHUSETTS AVENUE NW  
APT 705City  
WASHINGTONState  
DCZip Code  
20001-7624FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BROWNSTEIN HYATT FARBER SCHRECKOccupation (for Individual)  
POLICY DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27644817**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27672164**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

850.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 282 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721804

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRAVERS, CLARK, G., MR.,**

Mailing Address 147 MARSHALL CORNER WOODSVILLE RD

City  
HOPEWELLState  
NJZip Code  
08525-2821FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707511

Amount of Each Receipt this Period

285.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRUEX, RAYMOND, , ,**

Mailing Address 312 CHARLESTON LN.

City  
READINGState  
PAZip Code  
19610-1802FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

219.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676242

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

535.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 283 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRUJILLO, JACKLYN, B., ,**

Mailing Address 1852 N VANTAGE POINT DR.

City  
WASHINGTONState  
UTZip Code  
84780-1361FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27676154**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRUMP, MARVIS, , MRS.,**

Mailing Address RR 1 BOX 124

City  
LURAYState  
MOZip Code  
63453-2081FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27651125**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TUCKER, WILLIAM, , ,**

Mailing Address 123 WHISPERING PINES DR.

City  
MADISONState  
MSZip Code  
39110-8779FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27741551**

Amount of Each Receipt this Period

285.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

885.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 284 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TUNG, MAUHOI, , ,**

Mailing Address 101 DRANFORTH AVENUE

City  
JERSEY CITYState  
NJZip Code  
07305-FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

Transaction ID : SA11A.27701809

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TUNG, MAUHOI, , ,**

Mailing Address 101 DRANFORTH AVENUE

City  
JERSEY CITYState  
NJZip Code  
07305-FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

Transaction ID : SA11A.27701810

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TURPIN, JON, F., ,**

Mailing Address 2421 S PLUM ST

City  
YORKTOWNState  
INZip Code  
47396-1513FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

353.03

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

Transaction ID : SA11A.27730835

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

400.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 285 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TYSON, JANICE, , ,**Mailing Address 2800 STATE RD  
APT 315City  
TELFORDState  
PAZip Code  
18969-1089FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27677224**

Amount of Each Receipt this Period

225.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. URBAN, DAVID, J., ,**

Mailing Address 14580 OCEAN BLUFF DRIVE

City

FORT MYERS

State

FL

Zip Code

33908-4953

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGROccupation (for Individual)  
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690142**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City

PORT CHARLOTTE

State

FL

Zip Code

33981-

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27727486**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2745.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 286 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VANSAN, BRUCE, W., MR.,**

Mailing Address 324 MANCHESTER RD

City  
RIDGEWOODState  
NJZip Code  
07450-1213FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27676431**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VARBLE, CATHERINE, H., ,**

Mailing Address 3904 ELAND DR.

City  
PFLUGERVILLEState  
TXZip Code  
78660-6028FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726718**

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VERCHIO, JUDITH, , ,**

Mailing Address 1236 DARTFORD DR

City  
TARPON SPGSState  
FLZip Code  
34688-7640FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650634**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

550.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 287 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VOGES, JOAN, E., MRS.,**

Mailing Address 11113 OBST RD

City  
RED BUDState  
ILZip Code  
62278-4225FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681742**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VRIEZELAAR, TERRY, , MR.,**

Mailing Address PO BOX 220

City  
MONROEState  
IAZip Code  
50170-0220FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MIDLAND MFG CO INCOccupation (for Individual)  
MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27707135**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAHMAN, GERALD, , ,**

Mailing Address PO BOX 789

City  
ALMAState  
ARZip Code  
72921-0789FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

577.96

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721811**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 288 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WAITE, NORMAN, , MR.,**

Mailing Address P.O. BOX 5360

City  
AVONState  
COZip Code  
81620-5360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6041.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27731237

Amount of Each Receipt this Period

4000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKER, MICHAEL, , MR.,**

Mailing Address 8410 OAKFORD DRIVE

City  
SPRINGFIELDState  
VAZip Code  
22152-1613FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27671149

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALKER, PATRICIA, V., MS.,**

Mailing Address 1470 RIVERVIEW DR.

City  
LEWISPORTState  
KYZip Code  
42351-2434FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

319.65

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721455

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4525.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 289 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALKOVIAK, WILLIAM, , ,**

Mailing Address 8020 FRONT NINE LN

City  
NAVASOTAState  
TXZip Code  
77868-2229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27658131

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKOVIAK, WILLIAM, , ,**

Mailing Address 8020 FRONT NINE LN

City  
NAVASOTAState  
TXZip Code  
77868-2229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730899

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALLACE, CHARLES, R., MR., JR.**

Mailing Address 54 CANVASBACK CIR

City  
BRIDGEVILLEState  
DEZip Code  
19933-2428FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650967

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 290 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALMSLEY, LEONARD, J., MR.,**

Mailing Address P.O. BOX 634

City  
CONIFERState  
COZip Code  
80433-0634FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707912

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WARD, FRANCES, , MS.,**

Mailing Address 106 CRESCENT DR

City  
GREENWOODState  
SCZip Code  
29646-8643FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27723222

Amount of Each Receipt this Period

175.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WARD, LARRY, T., ,**

Mailing Address 1936 MARTIN GAMBILL RD

City  
CRUMPLERState  
NCZip Code  
28617-9461FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27707195

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

576.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 291 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WARFIELD, JAMES, C., MR.,**

Mailing Address 5854 LINCOLN HIGHWAY

City  
YORKState  
PAZip Code  
17406-8902FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27693243**

Amount of Each Receipt this Period

350.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WARNER, JOHN, H., MR., JR.**

Mailing Address P.O. BOX 2929

City  
LA JOLLAState  
CAZip Code  
92038-2929FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27654482**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WARREN, MARK, , ,**

Mailing Address 1155 F STREET, NW, SUITE 1200

City  
WASHINGTONState  
DCZip Code  
20004-1329FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

BROWNSTEIN HYATT FARBER SCHRECK

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664581**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1600.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 292 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATKINS, ADAM, , ,**

Mailing Address 4 WILLOW BEND DRIVE - SUITE 2A

City  
HATTIESBURGState  
MSZip Code  
39402-7515FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE ALL-STAR TEAM, INC., REALTORSOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748073

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATKINS, MAXINE, , MRS.,**

Mailing Address 517 LAKE RIDGE ROAD

City  
LEITCHFIELDState  
KYZip Code  
42754-6757FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671202

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATSON, JAMES, R., MR.,**

Mailing Address 12205 CHEVELLE DR

City  
STERLING HEIGHTSState  
MIZip Code  
48312-4023FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671594

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1250.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 293 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, JOHN, , MR.,**Mailing Address 61 HENRY DR.  
UNIT 205City  
SCARBOROUGHState  
MEZip Code  
04074-3508FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27707422**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATSON, KATHLEEN, , ,**

Mailing Address 333 SE 119TH STREET

City  
SOUTH BEACHState  
ORZip Code  
97366-9629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.03

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27730846**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATSON, RAY, S., MR.,**

Mailing Address 6153 SUNRISE MEADOWS LOOP

City  
RENOState  
NVZip Code  
89519-7339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698859**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

850.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 294 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATTS, ELAINE, , ,**

Mailing Address 165 NOVA CIR

City  
ALPINEState  
ALZip Code  
35014-7010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.73

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676425

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATTS, ELAINE, , ,**

Mailing Address 165 NOVA CIR

City  
ALPINEState  
ALZip Code  
35014-7010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.73

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27727135

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEBER, CAROL, J., ,**

Mailing Address 5551 WEBER RD

City  
WASHINGTONState  
MOZip Code  
63090-5533FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27715978

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

450.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 295 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEBSTER, BEVERLY, J., MS.,**

Mailing Address 206 DARSON DR

City  
ANDERSONState  
SCZip Code  
29621-6604FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27682084

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WENDT, THOMAS, , ,**

Mailing Address 7214 FORD DR NW

City  
GIG HARBORState  
WAZip Code  
98335-6481FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677329

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WESTMORELAND, GLORIA, H., ,**

Mailing Address 5122 CAMBAY ST

City  
NORTH PORTState  
FLZip Code  
34287-2881FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677334

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

600.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 296 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WESTMORELAND, GLORIA, H., ,**

Mailing Address 5122 CAMBAY ST

City  
NORTH PORTState  
FLZip Code  
34287-2881FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27696016**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTRICK, SIERRA, , ,**

Mailing Address 561 S CLUB DRIVE

City  
WOODSTOCKState  
GAZip Code  
30188-0139FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

REALTY ONE GROUP - WOODSTOCK

Occupation (for Individual)

REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27715721**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHATLEY, CATHERINE, B., MS.,**

Mailing Address 9137 MERRILL RD

City  
JACKSONVILLEState  
FLZip Code  
32225-4364FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

BUCK &amp; BUCK INC

Occupation (for Individual)

REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27748062**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►

1100.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 297 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHEELER, MIEKA, L., ,**

Mailing Address 27230 STONEY BROOK DR

City  
TRENTONState  
MIZip Code  
48183-4640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.05

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27658200**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHEELER, MIEKA, L., ,**

Mailing Address 27230 STONEY BROOK DR

City  
TRENTONState  
MIZip Code  
48183-4640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.05

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27726770**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITE, DAN, R., MR., JR.**

Mailing Address 818 TENTH STREET

City  
GAFFNEYState  
SCZip Code  
29340-2681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.10

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27727611**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 298 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITE, DEE, ANN, ,**Mailing Address 2106 KANAWHA BLVD E  
APT 523City  
CHARLESTONState  
WVZip Code  
25311-2240FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647872**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITE, ELIZABETH, , ,**

Mailing Address 1301 JANNEYS LN

City

ALEXANDRIA

State

VA

Zip Code

22302-3806

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

BROWNSTEIN HYATT FARBER SCHREK, LLP

Occupation (for Individual)

SHAREHOLDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27650270**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITE, JACOB, W., MR.,**

Mailing Address 426 MAY ST

City

JENNINGS

State

LA

Zip Code

70546-4840

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27706816**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

400.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 299 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITFIELD, JEFF, , MR.,**Mailing Address 25541 INDIAN HILL LN  
UNIT NCity  
LAGUNA HILLSState  
CAZip Code  
92653-6059FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27741694**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITTINGTON, JAMES, W., MR.,**

Mailing Address 1178 TRUCHARD LANE

City  
LINCOLNState  
CAZip Code  
95648-8144FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671295**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITTINGTON, JAMES, W., MR.,**

Mailing Address 1178 TRUCHARD LANE

City  
LINCOLNState  
CAZip Code  
95648-8144FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706960**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

350.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 300 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLETT, ROSCOE, , MR.,**

Mailing Address 5926 ASHWOOD BLUFF DR.

City  
LOUISVILLEState  
KYZip Code  
40207-1269FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27654147

Amount of Each Receipt this Period

1250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, ANGELA, , ,**

Mailing Address 8941 E STATE HWY 103

City  
LUFKINState  
TXZip Code  
75901-1277FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICAN REAL ESTATE, INCOccupation (for Individual)  
REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748037

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, RONALD, F., ,**

Mailing Address 3 CEDARWING LN

City  
SPRINGState  
TXZip Code  
77380-1510FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HORN SOLUTIONS INCOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676025

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1900.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 301 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WIMBERLEY, JAMES, , ,**

Mailing Address 411 STABLE VIS

City  
SAN ANTONIOState  
TXZip Code  
78227-4391FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671943

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINFREE, JAMES, HAMILTON, MR.,**

Mailing Address 354 BAKER ST

City  
KILGOREState  
TXZip Code  
75662-0117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726682

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINNAIL, JANE, C., MRS.,**

Mailing Address 615 S 234TH ST

City  
WATERLOOState  
NEZip Code  
68069-3803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718904

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 302 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOOD, BOBBY, , ,**

Mailing Address 323 TOBY TRAIL

City  
MT JULIETState  
TNZip Code  
37122-4119FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REMAX CARRIAGE HOUSEOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27748046

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOOD, ESTER, H., MRS.,**

Mailing Address 2485 TOWNLEY LN

City  
NORTH GARDENState  
VAZip Code  
22959-1805FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671586

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOOD, ESTER, H., MRS.,**

Mailing Address 2485 TOWNLEY LN

City  
NORTH GARDENState  
VAZip Code  
22959-1805FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681889

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

850.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 303 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODRUFF, PIERS, , MR.,**

Mailing Address PO BOX 503

SANTOLINA FARM

City  
SOMERSETState  
VAZip Code  
22972-0503FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27651037

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODRUFF, PIERS, , MR.,**

Mailing Address PO BOX 503

SANTOLINA FARM

City  
SOMERSETState  
VAZip Code  
22972-0503FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27676575

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODRUFF, PIERS, , MR.,**

Mailing Address PO BOX 503

SANTOLINA FARM

City  
SOMERSETState  
VAZip Code  
22972-0503FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698647

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 304 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODRUFF, PIERS, , MR.,**

Mailing Address PO BOX 503

SANTOLINA FARM

City  
SOMERSETState  
VAZip Code  
22972-0503FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27741382

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, KENNETH, H., MR.,**

Mailing Address 2009 RUSTIC DR.

City  
CASPERState  
WYZip Code  
82609-3407FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27723043

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, MARY, ANN, MS.,**

Mailing Address 350 N 190TH ST

City  
SHORELINEState  
WAZip Code  
98133-3837FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27677457

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

850.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 305 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, MARY, H., MR.,**

Mailing Address 300 BELL MEADE DR.

City  
EADSState  
TNZip Code  
38028-3524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27657488

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNT, DUANE, D., MR.,**

Mailing Address 5717 S 322ND PL

City  
AUBURNState  
WAZip Code  
98001-3870FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671674

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZAKARIA, ADEL, A., ,**Mailing Address 4001 N OCEAN BLVD  
UNIT 1508City  
BOCA RATONState  
FLZip Code  
33431-5352FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701805

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

525.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 306 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZHANG, SHUN, , ,**

Mailing Address 308 E RODELL PLACE

City  
ARCADIAState  
CAZip Code  
91006-5353FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REMAX CHAMPIONSOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27748077**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZIMMERMANN, ARTHUR, S., ,**

Mailing Address 1075 S SUNDANCE DR

City  
ANAHEIMState  
CAZip Code  
92808-2409FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657799**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZINK, SIDNY, K., ,**

Mailing Address 344 E 9TH STREET

City  
DURANGOState  
COZip Code  
81301-5225FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27722765**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 307 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AGUA CALIENTE BAND OF CAHUILLA**

Mailing Address 5401 DINAH SHORE DR

City  
PALM SPRINGSState  
CAZip Code  
92264-5970FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27744231

Amount of Each Receipt this Period

44300.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARONA BAND OF MISSION INDIANS**

Mailing Address 1095 BARONA RD

City  
LAKESIDEState  
CAZip Code  
92040-1541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27744250

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BGR GOVERNMENT AFFAIRS LLC**

Mailing Address P.O. BOX 14416

City  
WASHINGTONState  
DCZip Code  
20044-4416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27756337

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

RECEIVED FROM A PERMISSIBLE SOURCE; SEE  
ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

69300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 308 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CROZER, WILLIAM, , ,**Mailing Address 601 13TH ST NW  
11TH FLRCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27756353**

Amount of Each Receipt this Period

500.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEL MONTE, BRENT, , ,**Mailing Address 601 13TH ST NW  
11TH FLRCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GROUPOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27756343**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EARDENSOHN, TODD, , MR.,**Mailing Address 601 THIRTEENTH STREET NW  
ELEVENTH FLOOR SOUTHCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLCOccupation (for Individual)  
C.F.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27756340**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 309 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREENWOOD, DANIEL, , ,**

Mailing Address 2701 NORTH QUINCY STREET

City  
ARLINGTONState  
VAZip Code  
22207-5046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GROUPOccupation (for Individual)  
SENIOR VICE PRESIDENT, GOVERN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27756356**

Amount of Each Receipt this Period

500.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOFFMANN, MATT, , ,**Mailing Address 601 13TH STREET NORTHWEST  
11TH FLOOR SOUTHCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27756357**

Amount of Each Receipt this Period

500.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAI, JOE, , ,**Mailing Address 601 13TH ST NW  
11TH FLRCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27756352**

Amount of Each Receipt this Period

500.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 310 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANDRUM, PETE, , ,**Mailing Address 601 13TH STREET NW  
11TH FLOOR SOUTHCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27756350**

Amount of Each Receipt this Period

500.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUKAWSKI, JENNIFER, LARKIN , MS.,**Mailing Address 601 13TH ST NW  
11TH FLRCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27756349**

Amount of Each Receipt this Period

500.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANEY, JO, , ,**Mailing Address 601 13TH STREET NORTHWEST  
ELEVENTH FLOORCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27756355**

Amount of Each Receipt this Period

500.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 311 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONROE, LOREN, L., ,**Mailing Address 601 13TH ST NW  
11TH FLRCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27756342**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MUNSON, LESTER, , ,**Mailing Address 601 13TH ST NW  
11TH FLRCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27756347**

Amount of Each Receipt this Period

750.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURPHY, DAN, R., MR.,**Mailing Address 601 13TH ST NW  
11TH FLRCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLCOccupation (for Individual)  
CORPORATE COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

11000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27756341**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 312 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBERTS, WALKER, , ,**Mailing Address 601 13TH ST NW  
11TH FLRCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27756348

Amount of Each Receipt this Period

750.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RZEPKA, JUSTIN, , ,**Mailing Address 601 13TH STREET NORTHWEST  
11TH FLRCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27756344

Amount of Each Receipt this Period

1000.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STONE, JOHN, , ,**Mailing Address 601 13TH ST NW  
11TH FLRCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27756351

Amount of Each Receipt this Period

500.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 313 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRICKLAND, JERRY, , ,**Mailing Address 601 13TH STREET NW  
11TH FLOOR SOUTHCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2025

**Transaction ID : SA11A.27756354**

Amount of Each Receipt this Period

500.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VINEY, BILL, , MR.,**Mailing Address 601 13TH ST NW  
11TH FLRCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2025

**Transaction ID : SA11A.27756345**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALTON, ROBB, , ,**Mailing Address 601 13TH ST NW  
11TH FLRCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2025

**Transaction ID : SA11A.27756346**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 314 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELLS, ERSKINE, , MR.,**Mailing Address 9911 SHADY COVE DRIVE  
11TH FLRCity  
FAIRFAX STATIONState  
VAZip Code  
22039-2962FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GROUPOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27756339**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOOD, ROBERT, D., MR.,**Mailing Address 601 13TH NW  
11TH FLRCity  
WASHINGTONState  
DCZip Code  
20005-3822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BGR GROUPOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27756338**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COQUILLE INDIAN TRIBE TRIBAL GOVERNMENT**

Mailing Address 3050 TREMONT ST.

City  
NORTH BENDState  
ORZip Code  
97459-3059FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27744249**

Amount of Each Receipt this Period

44300.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

44300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 315 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FEDERATED INDIANS OF GRATON RANCHERIA**Mailing Address 6400 REDWOOD DRIVE  
SUITE 300City  
ROHNERT PARKState  
CAZip Code  
94928-2341FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27715759

Amount of Each Receipt this Period

44300.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORONGO BAND OF MISSION INDIANS**

Mailing Address 12700 PUMARRA ROAD

City  
BANNINGState  
CAZip Code  
92220-6977FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

41300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27744218

Amount of Each Receipt this Period

41300.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ONEIDA TRIBE OF INDIANS OF WISCONSIN**

Mailing Address PO BOX 365

City  
ONEIDAState  
WIZip Code  
54155-0365FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

41300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27763559

Amount of Each Receipt this Period

41300.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

126900.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 316 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SALT RIVER PIMA-MARICOPA INDIAN**

Mailing Address 10005 E. OSBORN ROAD

City  
SCOTTSDALEState  
AZZip Code  
85256-4019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

41300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27763573

Amount of Each Receipt this Period

41300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAN MANUEL BAND OF MISSION INDIANS**Mailing Address 515 SOUTH FIGUEROA STREET  
SUITE 1110City  
LOS ANGELESState  
CAZip Code  
90071-3314FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27763576

Amount of Each Receipt this Period

44300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANTA YNEZ BAND OF CHUMASH MISSION INDIANS**

Mailing Address PO BOX 517

City  
SANTA YNEZState  
CAZip Code  
93460-0517FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

41300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27763572

Amount of Each Receipt this Period

41300.00

☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

126900.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 317 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11C.27640345**

Amount of Each Receipt this Period

91479.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABSMEIER, DEBRA, , ,**

Mailing Address 3349 ATEOOD DR

City  
LOVELANDState  
COZip Code  
80538-4964FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641244**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMS, WILLIAM, , ,**

Mailing Address 6013 ROBERT RUARK DR

City  
SOUTHPORTState  
NCZip Code  
28461-2643FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

SELF EMPLOYED

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641788**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

139.10

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 318 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADIS, LEONARD, , ,**

Mailing Address 187 PANDOLFI AVENUE

City  
SECAUCUSState  
NJZip Code  
07094-3135FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640923**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADKINS, MARY, , ,**

Mailing Address 416 SW 725TH RD

City  
CHILHOWEEState  
MOZip Code  
64733-9229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642196**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALEXANDER, ROBERT, , ,**

Mailing Address P.O. BOX 3524

City  
GRAND JUNCTIONState  
COZip Code  
81502-3524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FINANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641713**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 319 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALFARO, ROSA, , ,**

Mailing Address 3059 HAWKSCREST DR

City  
WINCHESTERState  
CAZip Code  
92596-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641878

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALIOTA, PAULETTE, , ,**

Mailing Address 538 MARGO COURT

City  
ERIEState  
PAZip Code  
16505-2112FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640725

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALIOTA, PAULETTE, , ,**

Mailing Address 538 MARGO COURT

City  
ERIEState  
PAZip Code  
16505-2112FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1027.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641229

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

129.05

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 320 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALLEN, ALEXANDRA, , ,

Mailing Address P.O. BOX 58

City  
FERNANDINA BEACHState  
FLZip Code  
32035-0058FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641501

Amount of Each Receipt this Period

3.96

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALLEN, ALEXANDRA, , ,

Mailing Address P.O. BOX 58

City  
FERNANDINA BEACHState  
FLZip Code  
32035-0058FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641505

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AMICK, ROBERT, , ,

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642528

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 321 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMSTUTZ, SHERYL, , ,**Mailing Address 1307 S WATER ST  
UNIT 90City  
SILVERTONState  
ORZip Code  
97381-2471FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

866.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641883**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641396**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, CYNNIE, , ,**

Mailing Address 55 RODEO AVENUE # 5

City  
SAUSALITOState  
CAZip Code  
94965-1738FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

349.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642678**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 322 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANTHONY, MYRA, L., ,**

Mailing Address 10507 TEXAD HIGJWAY

City  
MANYState  
LAZip Code  
71449-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641546

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARTHUR, HARRY, , ,**

Mailing Address 1774 JOHN ANDERSON

City  
ORMOND BEACHState  
FLZip Code  
32176-3231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640457

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BACHELDOR, NED, , ,**Mailing Address 630 CAROLINA BAY DR  
APT 209City  
WILMINGTONState  
NCZip Code  
28403-2038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641496

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 323 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BALL, RUTH ANN, , ,**

Mailing Address 66 DEPOT DR.

City  
DAWSONVILLEState  
GAZip Code  
30534-6677FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641784

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARNES, PAUL, , ,**

Mailing Address 338 SUNSHINE WAY

City  
TURLOCKState  
CAZip Code  
95382-7373FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641448

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARNITT, RICHARD, , ,**

Mailing Address 325 COLUMBUS AVENUE

City  
HASBROUCK HEIGHTSState  
NJZip Code  
07604-1623FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US STATE DEPTOccupation (for Individual)  
INDEPENDENT CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641761

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 324 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARTONE, VIRGINIA, , ,**

Mailing Address 3009 MUMBARTO AVENUE

City  
BOISEState  
IDZip Code  
83713-5082FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.80

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641420**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAUGHMAN, JO ANN, , MS.,**

Mailing Address P.O. BOX 1269

City  
PHILOMATHState  
ORZip Code  
97370-1269FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641243**

Amount of Each Receipt this Period

61.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEACHAM, PAM, D., ,**

Mailing Address 4100 ST. IVES BLVD.

City  
SPRING HILLState  
FLZip Code  
34609-3185FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

211.44

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640449**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.15



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 325 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEAUDETT, JAMES, , ,**

Mailing Address 1743 DEEPWOOD COT

City  
ROCHESTERState  
MIZip Code  
48307-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641516

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BECK, ARNOLD, A., MR.,**

Mailing Address 300 FREDRICKSBURG CT. NE

City  
NORTH CANTONState  
OHZip Code  
44720-2575FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641290

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BELLUCHIE, LAURENCE, , ,**

Mailing Address 1910 TOWN CENTER BLVD

City  
ANNAPOLISState  
MDZip Code  
21401-3598FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641146

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 326 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERG, TED, , ,**

Mailing Address 115 LOYNS LAKE ROAD

City  
NASSAUState  
NYZip Code  
12123-2305FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642497

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEST, SAMMY, L., ,**

Mailing Address 1807 FM 3240

City  
BANDERAState  
TXZip Code  
78003-5233FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641655

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEST, SAMMY, L., ,**

Mailing Address 1807 FM 3240

City  
BANDERAState  
TXZip Code  
78003-5233FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1027.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641657

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

88.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 327 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEST, SAMMY, L., ,**

Mailing Address 1807 FM 3240

City  
BANDERAState  
TXZip Code  
78003-5233FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641680

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642397

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BHATTI, M, ARSHAD, ,**

Mailing Address 2200 TREMONT ST. APT. 205

City  
PHILADELPHIAState  
PAZip Code  
19115-5022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

355.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640933

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

99.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 328 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BISHOP, LUTHER, A., MR.,**

Mailing Address 1102 CENTER ST

City  
MILFORDState  
OHZip Code  
45150-1327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642327**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BITTINGER, THOMAS, E., ,**

Mailing Address P.O. BOX 176

City  
OAKLANDState  
MDZip Code  
21550-0176FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640809**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLUHM, JAMES, E., MR.,**

Mailing Address 16376 SE 89TH TERRACE

City  
SUMMERFIELDState  
FLZip Code  
34491-5804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

424.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641543**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 329 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNE

State  
AL

Zip Code  
35967-5145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.05

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025

**Transaction ID : SA11A.27641988**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNE

State  
AL

Zip Code  
35967-5145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.05

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025

**Transaction ID : SA11A.27641993**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNE

State  
AL

Zip Code  
35967-5145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

343.05

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025

**Transaction ID : SA11A.27641998**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 330 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNEState  
ALZip Code  
35967-5145FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.05

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642001**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNEState  
ALZip Code  
35967-5145FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.05

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642006**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOHLEN, LEE, , ,**

Mailing Address 6971 HERITAGE PARKWAY

City  
WESTState  
TXZip Code  
76691-2314FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.06

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642077**

Amount of Each Receipt this Period

94.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 331 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640500**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642098**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUGHER, MARY, LOU, ,**

Mailing Address 103 CIRCLE DR.

City  
MAYFIELDState  
KYZip Code  
42066-6902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641062**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 332 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUGHER, MARY, LOU, ,**

Mailing Address 103 CIRCLE DR.

City  
MAYFIELDState  
KYZip Code  
42066-6902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641087**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOULINEAU, EDWARD, C., MR.,**

Mailing Address 100 CIRCLE DR

City  
STATESBOROState  
GAZip Code  
30461-0578FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641383**

Amount of Each Receipt this Period

25.28

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOX, SALLY, , ,**

Mailing Address 4885 SEVIERVILLE RD

City  
MARYVILLEState  
TNZip Code  
37804-4651FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

752.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642462**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.28



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 333 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYD, BONNIE, J., ,**

Mailing Address 8656 SUNNYSLOPE DR.

City  
SAN GABRIELState  
CAZip Code  
91775-1129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642644

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, JULIA, , ,**

Mailing Address 25 HALDY AVE.

City  
COLUMBUSState  
OHZip Code  
43204-2656FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642141

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYD, SARA, , ,**Mailing Address 120 AZALEA LOOP  
SUITE ACity  
HORSESHOE BAYState  
TXZip Code  
78657-6205FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642597

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 334 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRAXTON, ROBERT, LEON, MR., SR.**

Mailing Address 181 PATAULA HEIGHTS LN

City  
FORT GAINESState  
GAZip Code  
39851-2328FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641197

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BREITBACH, PAUL, , ,**

Mailing Address 320 BUCKINGHAM RD

City  
WINSTON SALEMState  
NCZip Code  
27104-4027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641058

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRNAK, JIM, , ,**

Mailing Address 110 WEST MORGAN AVENUE

City  
KEENESBURGState  
COZip Code  
80643-9042FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641618

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

213.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 335 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, SHERRI, , ,**

Mailing Address 5834 E LEISURE LANE

City  
CAVE CREEKState  
AZZip Code  
85331-9102FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640817**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, THOMAS, , ,**

Mailing Address 345 GREEN DOLPHIN DRIVE

City  
PLACIDAState  
FLZip Code  
33946-2238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641032**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, WILLIAM, BRYANT, MR.,**

Mailing Address 408 FELLSWOOD PLACE

City  
LOUISVILLEState  
KYZip Code  
40243-1209FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

431.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641962**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 336 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITYState  
NJZip Code  
08226-2367FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641120

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURLAND, ALICE, , ,**

Mailing Address 4214 WATERBECK ST

City  
FULSHEARState  
TXZip Code  
77441-3904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640611

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUSS, DIETRICH, G., MR.,**

Mailing Address 1518 CAMINO DEL SOL

City  
FULLERTONState  
CAZip Code  
92833-1915FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640385

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 337 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUZOGANY, ALEX, , ,**

Mailing Address 1442 SOCIETY HILL DRIVE

City  
BENSALEMState  
PAZip Code  
19020-3689FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642071

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BYRD, FAREL, J., MR.,**

Mailing Address 986 SUGAR LANE

City  
COLLIERVILLEState  
TNZip Code  
38017-8645FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FAREL BYRD, CPA, PAOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641711

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BYRD, FAREL, J., MR.,**

Mailing Address 986 SUGAR LANE

City  
COLLIERVILLEState  
TNZip Code  
38017-8645FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FAREL BYRD, CPA, PAOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641721

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

182.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 338 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CADICAMO, EVELYN, M., MRS.,**

Mailing Address 43577 SERENITY DR

City  
NORTHVILLEState  
MIZip Code  
48167-8932FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642158**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CALASCIONE, PATRICIA, A., MRS.,**

Mailing Address 46 BAY 20 STREET

City  
BROOKLYNState  
NYZip Code  
11214-3802FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY PRO GROUP, INCOccupation (for Individual)  
EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642257**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAREY, JAMES, , ,**

Mailing Address 2929 N. WEST AVE.

City  
FRESNOState  
CAZip Code  
93705-3902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JAGUAR APARTMENTSOccupation (for Individual)  
LANDLORD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642559**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 339 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNE, DOUGLAS, A., MR.,**

Mailing Address 169 STRIPERS COVE LN

City  
CLARKSVILLEState  
VAZip Code  
23927-3227FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640430

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARNEY, JOSEPH, , MR.,**

Mailing Address 1371 WELLAND DR.

City  
ROCHESTERState  
MIZip Code  
48306-4826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641413

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNELLO, MARILYN, D., ,**

Mailing Address 38 WARD STREET

City  
RANDOLPHState  
MAZip Code  
02368-4625FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BROCKTON VISITING NURSE ASSOCIATIONOccupation (for Individual)  
CNA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

431.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642424

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 340 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642049**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641353**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642475**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.24



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 341 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642476

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642478

Amount of Each Receipt this Period

60.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHATTELLE, ROY, , ,**

Mailing Address 704 W 115TH AVE

City  
TAMPAState  
FLZip Code  
33612-5636FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642354

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

207.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 342 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHATTELLE, ROY, , ,**

Mailing Address 704 W 115TH AVE

City  
TAMPAState  
FLZip Code  
33612-5636FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642356**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHAVERA, OFILIA, , ,**

Mailing Address 3100 TWISTED CREEK

City

SAN ANTONIO

State

TX

Zip Code

78230-4046

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1048.13

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642527**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CITRON, DIANE, M., MRS.,**

Mailing Address 2620 ARIZONA AVE, APT 3

City

SANTA MONICA

State

CA

Zip Code

90404-1415

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

613.31

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640734**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 343 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641991

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641995

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641997

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 344 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642000**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, BONNIE, , ,**

Mailing Address 9217 W SIERRA PINTA DR

City  
PEORIAState  
AZZip Code  
85382-0983FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640661**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLOUGH, CHARLES, A., MR.,**

Mailing Address 303 HEMINGWAY DRIVE

City  
BEL AIRState  
MDZip Code  
21014-3216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642249**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 345 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLEMAN, KATHLEEN, , ,**

Mailing Address 7348 SECREST CT

City  
ARVADAState  
COZip Code  
80007-7621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642348**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLINS, CAROLE, , ,**

Mailing Address 5715 IVES PL.

City  
RIVERSIDEState  
CAZip Code  
92506-3541FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642544**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLUCCI, MARYLOU, , ,**

Mailing Address 127 BAYVIEW LN

City  
STATEN ISLANDState  
NYZip Code  
10309-3638FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

344.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640993**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 346 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONNOLLY, SUSAN, , ,**

Mailing Address 27217 WATERFALL HILL PARKWAY

City  
SPICEWOODState  
TXZip Code  
78669-3079FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641161

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONSTANZI, CHARLES, B., ,**

Mailing Address P.O. BOX 670

City  
PRINCETONState  
LAZip Code  
71067-0670FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

743.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641282

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONSTANTINE, RUSSELL, , ,**

Mailing Address 209 ROBIN HOOD DR

City  
COVINGTONState  
LAZip Code  
70433-4762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641360

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

206.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 347 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COOMBES, JIM, , MR.,**Mailing Address 7031 BEACH DR. SW  
APT DCity  
SEATTLEState  
WAZip Code  
98136-2095FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONSTRUCTION PLANNING AND M.Occupation (for Individual)  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641751**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COPPLE, CLAIRE, , ,**

Mailing Address 2324 BISMARCK AVE

City  
MANTECAState  
CAZip Code  
95337-7841FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642609**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORTESE, FRIEDA, , ,**

Mailing Address 24 WESTBOURNE LANE

City  
MELVILLEState  
NYZip Code  
11747-3305FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

309.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640610**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 348 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORTESE, FRIEDA, , ,**

Mailing Address 24 WESTBOURNE LANE

City  
MELVILLEState  
NYZip Code  
11747-3305FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641939

Amount of Each Receipt this Period

25.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642457

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CULBERTSON, LLOYD, , ,**

Mailing Address 10705S SW 69TH CT.

City  
PINECRESTState  
FLZip Code  
33156-3932FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

994.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641487

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

177.84



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 349 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURTIN, DINO, ALLEN, MR.,**

Mailing Address 228 U ST

City  
RIO LINDAState  
CAZip Code  
95673-1337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1405.40

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641230**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURTIN, DINO, ALLEN, MR.,**

Mailing Address 228 U ST

City  
RIO LINDAState  
CAZip Code  
95673-1337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1405.40

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641280**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CUSICK, BOB, , ,**

Mailing Address 1382 HUNTINGFORD DR.

City  
MARIETTAState  
GAZip Code  
30068-1715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

414.87

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640958**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

243.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 350 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DALTON, RAYMOND, , ,**

Mailing Address 2536 UNA ANTIOCH PIKE

City  
ANTIOCHState  
TNZip Code  
37013-2908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EXEC AIROccupation (for Individual)  
PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642523

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DALTON, RAYMOND, , ,**

Mailing Address 2536 UNA ANTIOCH PIKE

City  
ANTIOCHState  
TNZip Code  
37013-2908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EXEC AIROccupation (for Individual)  
PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642524

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DALTON, RAYMOND, , ,**

Mailing Address 2536 UNA ANTIOCH PIKE

City  
ANTIOCHState  
TNZip Code  
37013-2908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EXEC AIROccupation (for Individual)  
PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642525

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

62.49

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 351 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DALTON, RAYMOND, , ,**

Mailing Address 2536 UNA ANTIOCH PIKE

City  
ANTIOCHState  
TNZip Code  
37013-2908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EXEC AIROccupation (for Individual)  
PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.82

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642526**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAPPER, LEE, , ,**

Mailing Address 4433 S SAUK AVE

City  
SIERRA VISTAState  
AZZip Code  
85650-8102FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.50

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641397**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641801**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

220.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 352 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAVIS, CLAUDE, A., ,**

Mailing Address 6752 TAYLOR WOODS LN

City  
PLEASANT GARDENState  
NCZip Code  
27313-8139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
RETAIL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642211**

Amount of Each Receipt this Period

47.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEATS, WAYNE, , ,**

Mailing Address 2000 SNOWDROP DR.

City  
BAKERSFIELDState  
CAZip Code  
93311-3764FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641764**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640694**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 353 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641557

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642508

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEBAUGE, LAURENT, C., MR.,**

Mailing Address 940 CAPE MARCO DR. #2103

City  
MARCO ISLANDState  
FLZip Code  
34145-6639FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641318

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

362.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 354 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEGRISSELLES, JANET, , ,**

Mailing Address 14638 SAGAMORE COURT

City  
FORT MYERS

State  
FL

Zip Code  
33908-4912

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.70

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025

**Transaction ID : SA11A.27641187**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEGRISSELLES, JANET, , ,**

Mailing Address 14638 SAGAMORE COURT

City  
FORT MYERS

State  
FL

Zip Code  
33908-4912

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.70

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025

**Transaction ID : SA11A.27641700**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEGROODT, RALPH, , ,**

Mailing Address 31661 WELL BOTTOM RD

City  
GALENA

State  
MD

Zip Code  
21635-1334

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

309.78

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025

**Transaction ID : SA11A.27642440**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 355 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEKAM, MARY, , ,**

Mailing Address 6460 S 7 MILE RD

City  
FALMOUTHState  
MIZip Code  
49632-9771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GREAT LAKES DAIRY SUPPLYOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641234**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DESSAUER, MARILYNN, , ,**

Mailing Address 8679 BLUE FLAG WAY

City  
NAPLESState  
FLZip Code  
34109-4300FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640686**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DILORENZO, ESTHER, , ,**

Mailing Address 46309 CORDOBA DRIVE

City  
NOVIState  
MIZip Code  
48374-2435FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641138**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 356 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIMARCO, LAURA, , MRS.,**

Mailing Address 18800 BREWSTER RD

City  
CHAGRIN FALLSState  
OHZip Code  
44023-4904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642228

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIONNE, DOUGLAS, , ,**

Mailing Address 6122 WINDY KNL

City  
WINDCRESTState  
TXZip Code  
78239-2655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641703

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOWNING, CRAIG, , ,**

Mailing Address P.O. BOX 160

City  
BEAVERState  
OKZip Code  
73932-0160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RETAIL GROCER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

322.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642009

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.54



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 357 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DRAZAN, ARTHUR, D., ,**

Mailing Address 330 EAGLE DRIVE

City  
JUPITERState  
FLZip Code  
33477-4066FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.37

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641423**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNCAN, CHARLES, L., MR.,**

Mailing Address 202 PRESERVATION CIRCLE

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-8220FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.47

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642651**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNLEVY, PATRICIA, , ,**

Mailing Address 5121 BROWNSTONE DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-6028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.90

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641246**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 358 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DYKES, MARY, , ,**

Mailing Address 4611 18TH AVE

City  
COLUMBUSState  
GAZip Code  
31904-6027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641181

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DYKES, MARY, , ,**

Mailing Address 4611 18TH AVE

City  
COLUMBUSState  
GAZip Code  
31904-6027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641184

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DYKES, MARY, , ,**

Mailing Address 4611 18TH AVE

City  
COLUMBUSState  
GAZip Code  
31904-6027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641189

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 359 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EADES, LINDA, , ,**

Mailing Address 14250 STATE ROUTE JJ

City  
WEST PLAINSState  
MOZip Code  
65775-5834FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642140

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EALER, STEVEN, , ,**

Mailing Address 806 HAMILTON STREET

City  
EASTONState  
PAZip Code  
18042-1508FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642339

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640854

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 360 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642192**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642235**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City

PAWLEYS ISLAND

State  
SCZip Code  
29585-6174FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

640.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640772**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 361 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EDWARDS, JOHN, , ,**

Mailing Address 8705 #120 SOUTH TAMIAMI TRAIL

City  
SARASOTAState  
FLZip Code  
34238-3140FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642013**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EDWARDS, KEVIN, , ,**

Mailing Address 6153 FAIRLAWN DRIVE SW

City  
LAKEWOODState  
WAZip Code  
98499-2433FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TRANSERVICE LOGISTICSOccupation (for Individual)  
COMMERCIAL DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642585**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSONState  
MDZip Code  
21204-4701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640492**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

143.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 362 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSONState  
MDZip Code  
21204-4701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640831

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELDAR, LUE ANN, , ,**

Mailing Address 1632 HARMON COVE TOWER

City  
SECAUCUSState  
NJZip Code  
07094-1766FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMAZONOccupation (for Individual)  
E-COMMERCE OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640553

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELENIEWSKI, MARY LOU, , ,**

Mailing Address 5429 KONYA DRIVE

City  
TORRANCEState  
CAZip Code  
90503-1824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641969

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

73.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 363 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ESTIVALKREPLEY, MARIA, , ,**

Mailing Address 1901 PARK FOREST BLVD

City  
MOUNT DORAState  
FLZip Code  
32757-6929FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642458**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642583**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FANNIN, SUZAN, , MS.,**

Mailing Address 5903 85TH ST

City  
LUBBOCKState  
TXZip Code  
79424-3602FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

451.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640784**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 364 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FANNIN, SUZAN, , MS.,**

Mailing Address 5903 85TH ST

City  
LUBBOCKState  
TXZip Code  
79424-3602FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641118**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FAULKNER, WAYNE, , ,**

Mailing Address 62 APRIL WIND DR. S.

City  
MONTGOMERYState  
TXZip Code  
77356-5966FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

SNC LAVALIN

Occupation (for Individual)

I&amp;E DESIGNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641428**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FEIGENBAUM, ROBERT, , MR.,**

Mailing Address 339 AVALON DRIVE

City  
SOUTH SAN FRANCISCOState  
CAZip Code  
94080-5604FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

COVENANT AVIATION SECURITY

Occupation (for Individual)

TRANSPORTATION SECURITY OFFIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

462.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640658**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.41



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 365 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FERGUSON, CHARLES, , MR.,**

Mailing Address P.O. BOX 62107

City  
IRVINEState  
CAZip Code  
92602-6070FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642093**

Amount of Each Receipt this Period

110.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FIELDS, PATRICIA, , MS.,**Mailing Address 3455 CAMINITO SIERRA  
UNIT 302City  
CARLSBADState  
CAZip Code  
92009-8668FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640659**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISCHER, DALE, A., MR.,**

Mailing Address 22562 CLAUDE CIR.

City  
LAKE FORESTState  
CAZip Code  
92630-4609FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ACE ENTERENEASOccupation (for Individual)  
ADMIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640703**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

212.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 366 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISK, V., RONALD, MR.,**

Mailing Address 41320 FOX RUN ROAD

City  
NOVIState  
MIZip Code  
48377-5111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641348

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLEMING, NORMA, , ,**

Mailing Address 414 NW KNIGHTS AVE., #613

City  
LAKE CITYState  
FLZip Code  
32055-7247FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641270

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLYNN, SUSAN, , ,**

Mailing Address P.O. BOX 36229

City  
DALLASState  
TXZip Code  
75235-1229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRAM YNN ASSOCIATES INCOccupation (for Individual)  
OFC MGE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640988

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

188.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 367 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORD, BEVERLY, , ,**

Mailing Address 4350 COVE ISLAND DRIVE NORTHEAST

City  
MARIETTAState  
GAZip Code  
30067-3614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642670**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FORE, HOWARD, , ,**

Mailing Address 769 MAGNOLIA STREET

City  
MONTICELLOState  
GAZip Code  
31064-4563FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641444**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANZEN, KEVIN, , ,**

Mailing Address 374 EAST 7TH

City  
WINONAState  
MNZip Code  
55987-4060FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BAYSTATEOccupation (for Individual)  
PACKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641393**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 368 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRONCZAK, BRENDA, , ,**

Mailing Address 121 GASCOIGNE BLUFF RD.

City  
BLUFFTONState  
SCZip Code  
29910-6800FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642576**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FULLER, JOHN, D., MR.,**

Mailing Address 279 TOURNAMENT LN.

City  
FREEPORTState  
FLZip Code  
32439-6241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641452**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641667**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 369 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GARLICK, KAREN, , ,**

Mailing Address 6481 N. LEAD AVENUE

City  
FRESNOState  
CAZip Code  
93711-1028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641089

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GARLICK, KAREN, , ,**

Mailing Address 6481 N. LEAD AVENUE

City  
FRESNOState  
CAZip Code  
93711-1028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641421

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GARLICK, KAREN, , ,**

Mailing Address 6481 N. LEAD AVENUE

City  
FRESNOState  
CAZip Code  
93711-1028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

697.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641436

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

134.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 370 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GATES, BRUCE, A., MR.,**

Mailing Address P.O. BOX 143

City  
CLYDE PARKState  
MTZip Code  
59018-0143FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALTRIAOccupation (for Individual)  
SR. V.P. GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641644

Amount of Each Receipt this Period

20000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIBBS, CAROL, , ,**

Mailing Address 599 INDEPENDENCE AVE

City  
CHASKAState  
MNZip Code  
55318-3203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641981

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILLARD, SCOTT, , ,**

Mailing Address 212 ELM ST

City  
HANOVERState  
MAZip Code  
02339-2832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALVIN HOLLISOccupation (for Individual)  
HVAC TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640481

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20113.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 371 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILMAN, GERALD, , ,**

Mailing Address 33134 LAKE GARRISON STREET

City  
FREMONTState  
CAZip Code  
94555-1222FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641132

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641542

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641599

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

191.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 372 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOETERS, CHARLOTTE, , ,**

Mailing Address 5122 SANDYFIELDS LANE

City  
KATYState  
TXZip Code  
77494-2329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCCSOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641235**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOETERS, CHARLOTTE, , ,**

Mailing Address 5122 SANDYFIELDS LANE

City  
KATYState  
TXZip Code  
77494-2329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCCSOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641513**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOETERS, CHARLOTTE, , ,**

Mailing Address 5122 SANDYFIELDS LANE

City  
KATYState  
TXZip Code  
77494-2329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCCSOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641518**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 373 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOETERS, CHARLOTTE, , ,**

Mailing Address 5122 SANDYFIELDS LANE

City  
KATYState  
TXZip Code  
77494-2329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HCCSOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641520

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GONZALES, ROBERT, , ,**

Mailing Address P.O. BOX 1104

City  
KEMAHState  
TXZip Code  
77565-1104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HI-TEK SOUND SIGNALOccupation (for Individual)  
FIRE ALARM CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642493

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOOD, BRENDA, , ,**

Mailing Address 1213 WARWICK DR.

City  
MIAMISBURGState  
OHZip Code  
45342-3250FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

399.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642628

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

196.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 374 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOOD, BRENDA, , ,**

Mailing Address 1213 WARWICK DR.

City  
MIAMISBURGState  
OHZip Code  
45342-3250FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.55

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642629**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORDON, LOUISE, , ,**

Mailing Address 4075 BROOKS MILL DRIVE

City  
LITHONIAState  
GAZip Code  
30038-4143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1230.59

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640986**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, LOUISE, , ,**

Mailing Address 4075 BROOKS MILL DRIVE

City  
LITHONIAState  
GAZip Code  
30038-4143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1230.59

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640994**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 375 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, LOUISE, , ,**

Mailing Address 4075 BROOKS MILL DRIVE

City  
LITHONIAState  
GAZip Code  
30038-4143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1230.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641008**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORDON, LOUISE, , ,**

Mailing Address 4075 BROOKS MILL DRIVE

City  
LITHONIAState  
GAZip Code  
30038-4143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1230.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641014**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORE, TRINA, , ,**

Mailing Address 14321 SOUTHWEST 20TH STREET

City  
DAVIEState  
FLZip Code  
33325-5426FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1001.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640502**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 376 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRABER, GARY, , MR.,**

Mailing Address 9927 TERRITORY LN

City  
HOUSTONState  
TXZip Code  
77064-5227FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642383

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAINGER, SUSAN, , ,**

Mailing Address P.O. BOX 2898

City  
SANTA MARIAState  
CAZip Code  
93457-2898FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640518

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRANT, DAVISON, , ,**

Mailing Address P.O. BOX 26236

City  
AUSTINState  
TXZip Code  
78755-0236FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642201

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

189.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 377 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAY, CARL, M., MR.,**

Mailing Address 1015 NUCLEAR RD.

City  
MISHICOTState  
WIZip Code  
54228-9427FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641139

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAY, KAREN, , ,**

Mailing Address 208 BUCKINGHAM DR.

City  
KYLEState  
TXZip Code  
78640-5821FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640787

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598-2323FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

644.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642445

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

58.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 378 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRESLEY, ROSS, , ,**

Mailing Address 8278 CLIPPER COURT

City  
CATAWBAState  
NCZip Code  
28609-8287FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640510

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROVER, JANICE, , ,**

Mailing Address 173 HIGH STREET

City  
PACHECOState  
CAZip Code  
94553-5505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641304

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROVER, KAREN, , ,**

Mailing Address 925 COLORADO ST

City  
MARSEILLESState  
ILZip Code  
61341-1241FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640705

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

82.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 379 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUDORF, KENNETH, , ,**

Mailing Address 970 CAPE MARCO DR.

City  
MARCO ISLANDState  
FLZip Code  
34145-6399FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1716.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640754**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HADLEY, GARY, , ,**

Mailing Address 5616 BUENA VISTA DR.

City  
FRISCOState  
TXZip Code  
75034-2259FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LEARNING ENTERPRISES LLCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642287**

Amount of Each Receipt this Period

22.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAGLER, THOMAS, , ,**

Mailing Address 13229 S. W. 3RD LANE

City  
NEWBERRYState  
FLZip Code  
32669-5421FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642200**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 380 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAKE, SHIRLIE, , ,**

Mailing Address P O BOX 276

City  
MAPLE PARKState  
ILZip Code  
60151-0276FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641877

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMILTON, BILL, , ,**

Mailing Address 7713 KOLMAR AVE

City  
SKOKIEState  
ILZip Code  
60076-3654FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641171

Amount of Each Receipt this Period

17.59

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMLIN, DENNIS, , ,**

Mailing Address 18735 CORSINI DRIVE

City  
SAN ANTONIOState  
TXZip Code  
78258-1629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

624.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641223

Amount of Each Receipt this Period

2.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.29



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 381 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMMONS, JOYCE, , ,**

Mailing Address 3525 NEW DELHI DR.

City  
WINSTON SALEMState  
NCZip Code  
27101-6211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641670**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANNA, TIMOTHY, , ,**

Mailing Address 159 PROSPECT ST

City  
FRAMINGHAMState  
MAZip Code  
01701-4826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642520**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARBER, BARBIE, , ,**

Mailing Address 4910 LAKEWOOD ST

City  
HARRISONState  
MIZip Code  
48625-9645FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

372.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641511**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 382 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARKNESS, DAVID, , ,**

Mailing Address 102 NOD HILL

City  
WILTONState  
CTZip Code  
06897-1713FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641263

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEALY, MICHAEL, , MR.,**

Mailing Address 2435 N ROCK CREEK DR

City  
LOS BANOSState  
CAZip Code  
93635-8827FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640652

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEALY, MICHAEL, , MR.,**

Mailing Address 2435 N ROCK CREEK DR

City  
LOS BANOSState  
CAZip Code  
93635-8827FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640664

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

160.54

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 383 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEBL, SHARON, , ,**

Mailing Address 111 E LEMON ST

City  
WEST BRANCHState  
IAZip Code  
52358-1100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641582**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEEYER, PEGGY, , ,**

Mailing Address 443 CARIBBEAN DR. E

City  
SUMMERLAND KEYState  
FLZip Code  
33042-4845FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640528**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEINRICHS, SARAH, J., MRS.,**

Mailing Address 6004 AMBER OAKS AVE

City  
BAKERSFIELDState  
CAZip Code  
93306-7008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

324.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640638**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

143.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 384 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEINRICH, SARAH, J., MRS.,**

Mailing Address 6004 AMBER OAKS AVE

City  
BAKERSFIELDState  
CAZip Code  
93306-7008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640852**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENDERSON, MARGARET, , ,**

Mailing Address 10333 ARVIN HILL RD

City  
AUBREYState  
TXZip Code  
76227-6848FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640414**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENRY, SANDRA, , ,**

Mailing Address 20467 W GOOD HOPE RD

City  
LANNONState  
WIZip Code  
53046-9607FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642568**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 385 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERETH, JACK, R., MR.,**

Mailing Address 4066 EARNEY RD

City  
WOODSTOCKState  
GAZip Code  
30188-5218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIBSONBURG HEALTHOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640904**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERREN, WILLIAM, E., MR.,**

Mailing Address 2201 WOODRIDGE DR

City  
JASPERState  
ALZip Code  
35504-9555FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.85

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641709**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERROLD, BARBARA, J., MRS.,**

Mailing Address 3738 MARSBELLA PL

City  
KALAMAZOOState  
MIZip Code  
49006-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
K O PRODUCTSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1029.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640676**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

210.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 386 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HESTER, DON, , ,**

Mailing Address 3981 F. ST.

City  
EUREKAState  
CAZip Code  
95503-6003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.79

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641651

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HIDGES, CAROL, , ,**

Mailing Address 10 KINGS CASTLE

City  
SAN ANTONIOState  
TXZip Code  
78257-1732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642659

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIGHTOWER, JOHN, , ,**

Mailing Address 2115 SE 31ST ST

City  
OKEECHOBEEState  
FLZip Code  
34974-6721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642516

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 387 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HILL, JOHN, , ,

Mailing Address 25 E 40TH ST  
APT 6BCity  
INDIANAPOLISState  
INZip Code  
46205-5602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641213

Amount of Each Receipt this Period

15.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HILL, JOHN, , ,

Mailing Address 25 E 40TH ST  
APT 6BCity  
INDIANAPOLISState  
INZip Code  
46205-5602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641214

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HILL, JOHN, , ,

Mailing Address 25 E 40TH ST  
APT 6BCity  
INDIANAPOLISState  
INZip Code  
46205-5602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

213.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641215

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 388 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, JOHN, , ,**Mailing Address 25 E 40TH ST  
APT 6BCity  
INDIANAPOLISState  
INZip Code  
46205-5602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641250

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640760

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLIARD, LARRY, , ,**

Mailing Address 3803 BELHAVEN DR.

City  
GREENSBOROState  
NCZip Code  
27407-4415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

228.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641429

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

254.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 389 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOAR, NANCY, L., ,**

Mailing Address 73 S UTAH AVE.

City  
NEWARKState  
OHZip Code  
43055-3416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642127

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLAR, KENNETH, , ,**

Mailing Address 120 ALLEGHANY DRIVE

City  
SALISBURYState  
NCZip Code  
28147-7229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642662

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOOPER, CHARLES, I., MR.,**

Mailing Address 11242 CLINTON BAR RD

City  
PINE GROVEState  
CAZip Code  
95665-9619FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PROVIDER HEALTHCAREOccupation (for Individual)  
HOOPER PROPERTIES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

346.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640411

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

164.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 390 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOOPES, LARRY, , ,**

Mailing Address 5527 QUAIL RUN 1294

City  
PINEDALEState  
AZZip Code  
85934-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.50

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025

Transaction ID : SA11A.27641984

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOOPES, LARRY, , ,**

Mailing Address 5527 QUAIL RUN 1294

City  
PINEDALEState  
AZZip Code  
85934-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.50

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025

Transaction ID : SA11A.27641987

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HORVATH, LINDA, , ,**

Mailing Address P.O. BOX 34688

City  
INDIANAPOLISState  
INZip Code  
46234-0688FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

745.41

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025

Transaction ID : SA11A.27640373

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 391 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HORVATH, LINDA, , ,**

Mailing Address P.O. BOX 34688

City  
INDIANAPOLISState  
INZip Code  
46234-0688FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

745.41

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640708**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOWE, ANNE, , MS.,**

Mailing Address POB61980

City  
BOULDER CITYState  
NVZip Code  
89006-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.36

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642262**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HRONEC, MICHAEL, , ,**

Mailing Address 108 RICHARD MINE ROAD

City  
DOVERState  
NJZip Code  
07801-1611FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640848**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

406.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 392 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640712

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640903

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBER, MARY, R., ,**

Mailing Address 37641 30TH STREET

City  
ELMOREState  
MNZip Code  
56027-2035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

699.68

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642506

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 393 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUNT, SUSAN, , ,**

Mailing Address 522 N CANADIAN TER

City  
MUSTANGState  
OKZip Code  
73064-6105FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642360

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640524

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640798

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 394 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ITRICH, THOMAS, , ,**

Mailing Address 1532 MARSH WREN LN

City  
NAPLESState  
FLZip Code  
34105-2792FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641302

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IVAN, LAJOS, , ,**

Mailing Address 16 SARATOGA AVE.

City  
BOUND BROOKState  
NJZip Code  
08805-1232FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642389

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACOBS, MICHAEL, , ,**

Mailing Address 3 WHITE OAK DR.

APT C

City  
SMITHFIELDState  
NCZip Code  
27577-4872FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

502.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642378

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

127.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 395 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAMES, JERRY, G., MR.,**

Mailing Address 409-42 AVE.

City  
GREELEYState  
COZip Code  
80634-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
O-IOccupation (for Individual)  
MOLD TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642375**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640581**

Amount of Each Receipt this Period

1.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAVIER, FLORDELINA, , ,**

Mailing Address 7566 EASTHILL DR

City  
SAN DIEGOState  
CAZip Code  
92114-3343FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640613**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 396 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAVIER, FLORDELINA, , ,**

Mailing Address 7566 EASTHILL DR

City  
SAN DIEGOState  
CAZip Code  
92114-3343FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640618

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAVIER, FLORDELINA, , ,**

Mailing Address 7566 EASTHILL DR

City  
SAN DIEGOState  
CAZip Code  
92114-3343FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640620

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641232

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.60



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 397 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JENSEN, V., GAIL, ,**

Mailing Address 405 ANGLERSDRIVE, UNIT 1-185

City  
STEAMBOAT SPRINGSState  
COZip Code  
80487-9352FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641762**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNS, PATRICIA, D., ,**

Mailing Address P. O. BOX 7

City  
SAULSBURYState  
TNZip Code  
38067-0007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640472**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, SUSAN, J., MS.,**

Mailing Address 3418 E SUNCREST CT

City  
PHOENIXState  
AZZip Code  
85044-3506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRAFFICADEOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

431.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641042**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 398 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, FRANK, , , III**

Mailing Address 457 AVONDALE DR.

City  
BRANSONState  
MOZip Code  
65616-3485FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641915

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, JEANNETTE, , ,**

Mailing Address 873 CRESTVIEW CIRCLE

City  
FORT LAUDERDALEState  
FLZip Code  
33327-1847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642620

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642018

Amount of Each Receipt this Period

23.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

134.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 399 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, SUSAN, , ,**

Mailing Address 3307 PLACID PL

City  
OWENSBOROState  
KYZip Code  
42303-7040FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640359

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, SUSAN, , ,**

Mailing Address 3307 PLACID PL

City  
OWENSBOROState  
KYZip Code  
42303-7040FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640366

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, SUSAN, , ,**

Mailing Address 3307 PLACID PL

City  
OWENSBOROState  
KYZip Code  
42303-7040FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

288.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640368

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 400 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWSState  
TXZip Code  
79714-2010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641765

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOYCE, RICHARD, , ,**Mailing Address 1350 E NORTH ST  
LOT 84City  
CROWN POINTState  
INZip Code  
46307-6400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641321

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOYCE, RICHARD, , ,**Mailing Address 1350 E NORTH ST  
LOT 84City  
CROWN POINTState  
INZip Code  
46307-6400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

284.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641619

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

111.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 401 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOYCE, RICHARD, , ,**Mailing Address 1350 E NORTH ST  
LOT 84City  
CROWN POINTState  
INZip Code  
46307-6400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641626

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEARNS, RICHARD, , ,**

Mailing Address 13576 EAGLE POINTE DR

City  
PORT CHARLOTTEState  
FLZip Code  
33953-4674FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641331

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEENAN, MARK, , ,**

Mailing Address 16719 SMOKY MOUNTAIN AVENUE

City  
CALDWELLState  
IDZip Code  
83607-1451FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VALLRYRIDEOccupation (for Individual)  
BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641723

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 402 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEMPFERT, VERNON, , ,**

Mailing Address 2724 GLADSTONE AVE

City  
ANN ARBORState  
MIZip Code  
48104-6431FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641114**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KENDRICK, TIMOTHY, , ,**

Mailing Address 2229 CHESTNUT

City  
CHARLESTONState  
WVZip Code  
25309-4669FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640535**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KENT, BRAD, , ,**

Mailing Address 1897 W SUTTON RD

City  
OTHELLOState  
WAZip Code  
99344-9048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

399.32

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641446**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 403 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KENYON, TONI, , ,**

Mailing Address 83 CONCORD RD

City  
BEDFORDState  
MAZip Code  
01730-2036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

982.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642310

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KERNS, DIANA, , ,**

Mailing Address 3529 CHELLEN DRIVE

City  
FARMERS BRANCHState  
TXZip Code  
75234-6621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642514

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KIMBROUGH, SUE, P., MRS.,**Mailing Address 8090 FRANKFORD RD  
APT 312City  
DALLASState  
TXZip Code  
75252-0020FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642335

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

211.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 404 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KIRBY, ERROL, , MR.,**

Mailing Address 2895 TOBIANO DR.

City  
RENOState  
NVZip Code  
89521-8022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

797.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641084**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIRBY, ERROL, , MR.,**

Mailing Address 2895 TOBIANO DR.

City  
RENOState  
NVZip Code  
89521-8022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

797.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642671**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNOWLES, MARSHALL, F., MR.,**

Mailing Address 588 MOUNT CARMEL RD

City  
CULLODENState  
GAZip Code  
31016-6134FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CARPENTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642003**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 405 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOBES, GENE, , ,**

Mailing Address 441 DEER MEADOW BLVD

City  
CIBOLOState  
TXZip Code  
78108-3112FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641376

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640417

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KYGER, VIKKI, , ,**

Mailing Address 923 DOVER GLEN DRIVE

City  
NORTH LAS VEGASState  
NVZip Code  
89031-1905FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642471

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 406 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LACKEY, ANN, , ,**

Mailing Address 1117 SPRUCE STREET

City  
LAKE OSWEGOState  
ORZip Code  
97034-6153FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640517**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANCE, TERESA, , ,**

Mailing Address 2004 SIFIELD GREENS WAY

City  
SUN CITY CENTERState  
FLZip Code  
33573-7168FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641633**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANDESMAN, MARIA, A., MRS.,**

Mailing Address 920 PARK AVE. APT. 10A

City  
NEW YORKState  
NYZip Code  
10028-0369FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641744**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

26.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 407 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANPHEAR, JEFF, , ,**

Mailing Address P.O. BOX 488

City  
JEWETT CITYState  
CTZip Code  
06351-0488FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NOREASTEROccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640688**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642066**

Amount of Each Receipt this Period

7.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAWRENCE, WILLIAM, , ,**

Mailing Address 3003 GRAND ELM CIRCLE

City  
HOUSTONState  
TXZip Code  
77068-2124FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640806**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 408 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAYCOCK, JAMES, , ,**

Mailing Address 7628 GANNON AVENUE

City  
UNIVERSITY CITYState  
MOZip Code  
63130-2819FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENTERPRISEOccupation (for Individual)  
PART TIME DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642679**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAYO, LEWIS, DANIEL, MR., SR.**

Mailing Address 2316 W VINE ST

City  
LODIState  
CAZip Code  
95242-3727FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
H&R BLOCK TAX GROUPOccupation (for Individual)  
ENROLLED AGENT/TAX PREPARATI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640633**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LE NORMAN, DAVID, , ,**Mailing Address 9400 BROADWAY EXT  
STE 700City  
OKLAHOMA CITYState  
OKZip Code  
73114-7444FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REIGN CAPITALOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641621**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 409 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641974

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEE, WILLIAM, , ,**

Mailing Address 37451 BAY HARBOR DRIVE

City  
REHOBOTH BEACHState  
DEZip Code  
19971-1580FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642218

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LENZ, SUSAN, H., MRS.,**

Mailing Address 4023 GLEN ABBY CIR

City  
STOCKTONState  
CAZip Code  
95219-1813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IACOPI & LENZOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640460

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 410 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LENZ, SUSAN, H., MRS.,**

Mailing Address 4023 GLEN ABBY CIR

City  
STOCKTONState  
CAZip Code  
95219-1813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IACOPI & LENZOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640461**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LENZ, SUSAN, H., MRS.,**

Mailing Address 4023 GLEN ABBY CIR

City  
STOCKTONState  
CAZip Code  
95219-1813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IACOPI & LENZOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640462**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LENZ, SUSAN, H., MRS.,**

Mailing Address 4023 GLEN ABBY CIR

City  
STOCKTONState  
CAZip Code  
95219-1813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IACOPI & LENZOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640463**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 411 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LENZ, SUSAN, H., MRS.,**

Mailing Address 4023 GLEN ABBY CIR

City  
STOCKTONState  
CAZip Code  
95219-1813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IACOPI & LENZOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640465**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LENZ, SUSAN, H., MRS.,**

Mailing Address 4023 GLEN ABBY CIR

City  
STOCKTONState  
CAZip Code  
95219-1813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IACOPI & LENZOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640466**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LERNER, GLENN, , ,**

Mailing Address 445 EL CAMINO DEL MAR

City  
SAN FRANCISCOState  
CAZip Code  
94121-1039FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641627**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 412 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEVIS, RICHARD, E., MR.,**

Mailing Address 5225 OLD RIVER ROAD

City  
BAKERState  
FLZip Code  
32531-9302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642145

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEVIS, RICHARD, E., MR.,**

Mailing Address 5225 OLD RIVER ROAD

City  
BAKERState  
FLZip Code  
32531-9302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642151

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEVIS, RICHARD, E., MR.,**

Mailing Address 5225 OLD RIVER ROAD

City  
BAKERState  
FLZip Code  
32531-9302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642157

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.83



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 413 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIGHT, IDA, , ,**

Mailing Address P.O.BOX 218

City  
BROAD RUNState  
VAZip Code  
20137-0218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.77

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641722**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642345**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINDSEY, RICHARD, , ,**

Mailing Address 1175 RICHMOND CT

City  
MOBILEState  
ALZip Code  
36695-3558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LINDSEY & WALDOOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

535.00

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641097**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

68.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 414 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LLOYD, CINDY, , ,**

Mailing Address 15885 ROUTE 6

City  
SMETHPORTState  
PAZip Code  
16749-3845FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642552**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LLOYD, CINDY, , ,**

Mailing Address 15885 ROUTE 6

City  
SMETHPORTState  
PAZip Code  
16749-3845FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642553**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640406**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 415 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640410**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641199**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641642**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 416 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOWRY, DIANE, , ,**

Mailing Address 9 WOODRIDGE RD

City  
MOULTRIEState  
GAZip Code  
31768-5815FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641850

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOWRY, FRED, L., MR., SR.**

Mailing Address 967 PIONEER RD.

City  
DRAPERState  
UTZip Code  
84020-9334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOWRY & ASSOCIATESOccupation (for Individual)  
SMALL BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1339.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641752

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUMBER, MICHAEL, , MR.,**

Mailing Address 23077 SOUTHWEST NEWLAND ROAD

City  
WILSONVILLEState  
ORZip Code  
97070-6701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641055

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 417 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUTHER, ROBERT, , MR.,**

Mailing Address 2201 LAUREL OAK DRIVE

City  
VALENCIAState  
PAZip Code  
16059-8776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.16

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640551**

Amount of Each Receipt this Period

7.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUTHER, ROBERT, , MR.,**

Mailing Address 2201 LAUREL OAK DRIVE

City  
VALENCIAState  
PAZip Code  
16059-8776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.16

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641519**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUTHER, ROBERT, , MR.,**

Mailing Address 2201 LAUREL OAK DRIVE

City  
VALENCIAState  
PAZip Code  
16059-8776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.16

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641553**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

22.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 418 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUTSCHG, VIVIAN, , MRS.,**

Mailing Address 2400 MAPLE ST.

City  
CHADRONState  
NEZip Code  
69337-9369FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641716**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LYSTER, ELOISE, , ,**

Mailing Address P.O. BOX 28

City  
BENDState  
ORZip Code  
97709-0028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640966**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACARIO, KELLI, , ,**

Mailing Address 27136 SOUTH INDIAN ROAD

City  
PARK HILLState  
OKZip Code  
74451-3022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

858.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642429**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 419 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACHADO, LEONARD, , ,**

Mailing Address 21520 G YORBA LINDA BLVD

City  
YORBA LINDAState  
CAZip Code  
92887-3764FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641699**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANTHEI, LEAH, , MS.,**

Mailing Address 46646 COUNTY ROAD 613

City  
NASHWAUKState  
MNZip Code  
55769-4515FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640954**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARLATT, MICHAEL, , ,**

Mailing Address P.O. BOX 1299

City  
RIVERSIDEState  
CAZip Code  
92502-1299FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THOMPSON COLEGATEOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642654**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 420 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARSHALL, RONALD, H., ,**

Mailing Address 1990 N US 23

City  
HARRISVILLEState  
MIZip Code  
48740-9777FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641226

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARSHALL, RONALD, H., ,**

Mailing Address 1990 N US 23

City  
HARRISVILLEState  
MIZip Code  
48740-9777FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641733

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTINO, BOB, , ,**

Mailing Address P.O. BOX 1101

City  
SKIPPACKState  
PAZip Code  
19474-1101FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642189

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

137.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 421 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, EDWARD, S., MR.,**Mailing Address 112 MARWOOD RD  
APT 4237City  
CABOTState  
PAZip Code  
16023-2259FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1784.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641271

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, EDWARD, S., MR.,**Mailing Address 112 MARWOOD RD  
APT 4237City  
CABOTState  
PAZip Code  
16023-2259FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1784.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641272

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, EDWARD, S., MR.,**Mailing Address 112 MARWOOD RD  
APT 4237City  
CABOTState  
PAZip Code  
16023-2259FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1784.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641274

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

109.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 422 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, EDWARD, S., MR.,**Mailing Address 112 MARWOOD RD  
APT 4237City  
CABOTState  
PAZip Code  
16023-2259FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1784.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641275

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, EDWARD, S., MR.,**Mailing Address 112 MARWOOD RD  
APT 4237City  
CABOTState  
PAZip Code  
16023-2259FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1784.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641281

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

464.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641485

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

210.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 423 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640931**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATEER, RAYMOND, , ,**

Mailing Address 1278 MATEER RD

City  
KITTANNINGState  
PAZip Code  
16201-8024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640554**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATHIS, DENE, , MRS.,**

Mailing Address 402 N. EVERGREEN

City  
ARLINGTON HEIGHTSState  
ILZip Code  
60004-6008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

472.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642261**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 424 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATTHEWS, ANNETTA, , ,**

Mailing Address 100 SAGART LN

City  
NICHOLASVILLEState  
KYZip Code  
40356-9735FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

884.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641296**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATTHEWS, DUANE, , ,**

Mailing Address 3742 TAILS CREEK ROAD

City  
ELLIJAYState  
GAZip Code  
30540-2021FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641837**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATTOX, JERRY, , ,**

Mailing Address P.O. BOX 752

City  
GILCHRISTState  
ORZip Code  
97737-0752FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

329.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641480**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 425 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCLLENATHAN, STEPHEN, , ,**

Mailing Address 1423 HERKIMER STEET

City  
HOUSTONState  
TXZip Code  
77008-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641169

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNEESE, PATRICK, , ,**

Mailing Address 6912 EAST 53RD PLACE

City  
TULSAState  
OKZip Code  
74145-7505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641964

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCPHERSON, JEFFREY, , ,**

Mailing Address 111 TAYLOR STREET

City  
GRANBYState  
MAZip Code  
01033-9522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640442

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 426 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEEHAN, JOAN, , ,**

Mailing Address 2874 GOLDEN GATE AVE

City  
SAN FRANCISCOState  
CAZip Code  
94118-4111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1962.85

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641563**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEEHAN, JOAN, , ,**

Mailing Address 2874 GOLDEN GATE AVE

City  
SAN FRANCISCOState  
CAZip Code  
94118-4111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1962.85

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641775**

Amount of Each Receipt this Period

34.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MELENDEZ, LUIS, , ,**

Mailing Address 12TIRRELLST#2

City  
WORCESTERState  
MAZip Code  
01603-2653FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.07

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641074**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 427 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MELVILLE, ROBERT, , MR.,**

Mailing Address 6235 HARMON GREEN AVE

City  
GRANDVILLEState  
MIZip Code  
49418-9732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.91

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642040**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MELVILLE, ROBERT, , MR.,**

Mailing Address 6235 HARMON GREEN AVE

City  
GRANDVILLEState  
MIZip Code  
49418-9732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.91

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642045**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. METHENY, WILLIAM, , ,**

Mailing Address P.O. BOX 414

City  
BRIDGERState  
MTZip Code  
59014-0414FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

352.49

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642324**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 428 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIKEL, BILLY, , ,**

Mailing Address 11 EAGLE STREET NORTHEAST

City  
FORT WALTON BEACHState  
FLZip Code  
32547-1705FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642060**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILES, DIANNE, E., MRS.,**

Mailing Address 2661 TALLANT RD, C898

City  
SANTA BARBARAState  
CAZip Code  
93105-4839FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640947**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641787**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

203.08



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 429 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642647

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-3606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640925

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-3606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

695.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641238

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 430 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-3606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642293

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOK, LIMING, , ,**

Mailing Address 29726 COJAK CIRCLE

City  
FAIR OAKS RANCHState  
TXZip Code  
78015-4521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642292

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOK, LIMING, , ,**

Mailing Address 29726 COJAK CIRCLE

City  
FAIR OAKS RANCHState  
TXZip Code  
78015-4521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

395.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642314

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

56.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 431 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOK, LIMING, , ,**

Mailing Address 29726 COJAK CIRCLE

City  
FAIR OAKS RANCHState  
TXZip Code  
78015-4521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642317

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOK, LIMING, , ,**

Mailing Address 29726 COJAK CIRCLE

City  
FAIR OAKS RANCHState  
TXZip Code  
78015-4521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642334

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTAGNE, GERARD, , ,**

Mailing Address 203 PIER E

City  
NAPLESState  
FLZip Code  
34112-8125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641966

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

96.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 432 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640779

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641357

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOODY, EVAN, E., MR.,**

Mailing Address 26 CHERRY HILLS FARM DR.

City  
ENGLEWOODState  
COZip Code  
80113-7165FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MOODY INSURANCE AGENCYOccupation (for Individual)  
INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

408.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641873

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 433 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOODY, JO, ANN, ,**

Mailing Address 507 POWER DR.

City  
DUNCANVILLEState  
TXZip Code  
75116-3721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642396**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOORE, SUSAN, , ,**

Mailing Address 70 BROOKS ROAD

City  
LONGMEADOWState  
MAZip Code  
01106-2129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642419**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOSS, LOGAN, , ,**

Mailing Address 16615 LA CATANIA WAY

City  
AUSTINState  
TXZip Code  
78738-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641639**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 434 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOTT, BOB, , ,**

Mailing Address 5608 W BARTLETT AVE

City  
LAS VEGASState  
NVZip Code  
89108-3216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640520**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOUAT, NANCY, M., MS.,**

Mailing Address 29242 HIGHWAY 127

City  
GREEN RIDGEState  
MOZip Code  
65332-2303FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640962**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUSSLER, CYNTHIA, E., MISS,**

Mailing Address 14831 DOMART AVE

City  
NORWALKState  
CAZip Code  
90650-5303FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641872**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

234.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 435 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEEDHAM, DEBBIE, , ,**

Mailing Address 590 COUNTRY CLUB DR.

City  
NEW CANEYState  
TXZip Code  
77357-3112FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NEW CANEY ISDOccupation (for Individual)  
CHILD NUTRITION DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641332

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEGRON, RAMON, A., MR.,**

Mailing Address 203 PRESIDENTE RAMIREZ ST

City  
SAN JUANState  
PRZip Code  
00918-4319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ICPR JUNIOR COLLEGEOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641157

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, J., SCOTT, ,**

Mailing Address 5540 WEST EL PASO AVENUE

City  
FRESNOState  
CAZip Code  
93722-2788FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641819

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

179.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 436 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEVES, RICHARD, , ,**

Mailing Address 737 DANE CT

City  
HEMETState  
CAZip Code  
92543-1785FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640880

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NICKELS, ALFRED, , ,**

Mailing Address 3248 LAURELWOOD DRIVE

City  
TWIN FALLSState  
IDZip Code  
83301-8106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642276

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NORRIS, DANIEL, , ,**

Mailing Address 22680 CEDAR LANE CT. APT. 3408

City  
LEONARDTOWNState  
MDZip Code  
20650-3933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

363.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641578

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

652.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 437 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOYES, RITA, S., MRS.,**

Mailing Address 4070 FOUNDERS CLUB DR.

City  
SARASOTAState  
FLZip Code  
34240-1441FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.60

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641107**

Amount of Each Receipt this Period

7.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OAK, ALAN, , MR.,**

Mailing Address 5104 BONHAM RD

City  
OXFORDState  
OHZip Code  
45056-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.83

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642270**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640529**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 438 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640530**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640531**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640532**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 439 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640533**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640538**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLSON, PHILIP, , ,**

Mailing Address 2205 ENGLEWOOD AVE

City  
YAKIMAState  
WAZip Code  
98902-1647FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

378.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641704**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 440 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ORDWAY, CHRIS, R., MR.,**

Mailing Address 292 ISLAND CREEK DR.

City  
VERO BEACHState  
FLZip Code  
32963-3303FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640416**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSBURN, ROBERT, , ,**

Mailing Address 12735 SHADOW CREEK PARKWAY

City  
PEARLANDState  
TXZip Code  
77584-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640765**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAINTER, GLORIA, , ,**

Mailing Address 2516 BARBADOS DRIVE

City  
GAUTIERState  
MSZip Code  
39553-6762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642630**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 441 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALERMINO, RONALD, , ,**

Mailing Address 64 COUNTY LINE ROAD

City  
AMITYVILLEState  
NYZip Code  
11701-3121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640788**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PANDOLFO, MICHAEL, , MR.,**

Mailing Address 7900 SUTHERLAND FARM RD

City  
PROSPECTState  
KYZip Code  
40059-9269FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.60

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641002**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKS, JENNIE, , ,**

Mailing Address 386 W TROXELL RD

City  
OAK HARBORState  
WAZip Code  
98277-7909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

521.93

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642267**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 442 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAULSON, KATHLEEN, , ,**

Mailing Address 7725 E SANDALWOOD

City  
SCOTTSDALEState  
AZZip Code  
85250-7732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.55

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640444**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.76

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641697**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.76

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641880**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 443 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, GORDON, A., MR.,**

Mailing Address 3232 LAFAYETTE DR.

City  
TRENTONState  
MIZip Code  
48183-3477FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640711

Amount of Each Receipt this Period

28.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRY, HUGH, D., MR.,**

Mailing Address 5205 FREDERICKSBURG WAY E

City  
BRENTWOODState  
TNZip Code  
37027-4770FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640868

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETITJEAN, SANDRA, , ,**

Mailing Address 6832 TAMARA LANE

City  
ASSARIAState  
KSZip Code  
67416-8875FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640579

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 444 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETRITZ, GEORGE, L., ,**

Mailing Address 4811 ROGERS ROAD

City  
BEULAHState  
MIZip Code  
49617-9562FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640577

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640483

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642298

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

22.08



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 445 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642624**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHIPPS, ALLEN, M., MR.,**

Mailing Address 925 WHITEHALL LN

City  
REDWOOD CITYState  
CAZip Code  
94061-3686FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.33

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640952**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642168**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 446 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIERCE, ARLENE, , ,**

Mailing Address 4931 ELMGATE DR.

City  
ORCHARD LAKEState  
MIZip Code  
48324-3012FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642252**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIETTE, LYSSA, , ,**

Mailing Address 118 EAST ERIE STREET 23A

City  
CHICAGOState  
ILZip Code  
60611-5151FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641660**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PINCHES, CYNTHIA, , ,**

Mailing Address 16 BUNKER HILL ROAD

City  
NEW BRITAINState  
CTZip Code  
06053-2206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1376.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640498**

Amount of Each Receipt this Period

20.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 447 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POHOST, GERALD, , DR.,**

Mailing Address 4366 W 8TH ST

City  
LOS ANGELESState  
CAZip Code  
90005-3788FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641219

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POHOST, GERALD, , DR.,**

Mailing Address 4366 W 8TH ST

City  
LOS ANGELESState  
CAZip Code  
90005-3788FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641292

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642606

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 448 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640979**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POWERS, RONALD, , ,**

Mailing Address 9 CEDAR CIR

City  
TOWNSENDState  
MAZip Code  
01469-1337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RAYTHEON TECHOccupation (for Individual)  
ENGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642499**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRESCOTT, ALLEN, , ,**

Mailing Address 11540 W OAKMONT DR

City  
MUKILTEOState  
WAZip Code  
98275-4871FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641016**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 449 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRESTON, DAVID, LLOYD, MR.,**

Mailing Address 3835 W WOODSIDE AVE

City  
VISALIAState  
CAZip Code  
93291-5563FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SAFETY STRIPING SERVICE, INCOccupation (for Individual)  
PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641382**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRICE, DELORES, , ,**

Mailing Address 9215 SE 29TH AVE

City  
PORTLANDState  
ORZip Code  
97222-6449FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640562**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRINDLE, GLEN, , ,**

Mailing Address 942 DISCOVERY CIR NE

City  
ISSAQUAHState  
WAZip Code  
98029-6203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPUOccupation (for Individual)  
FACILITY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640382**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 450 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. QUINTANA, VIRGINIA, , MRS.,**

Mailing Address 6601 RANCHO SANTA FE DR.

City  
LAS VEGASState  
NVZip Code  
89130-1725FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1622.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641990

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUINTANA, VIRGINIA, , MRS.,**

Mailing Address 6601 RANCHO SANTA FE DR.

City  
LAS VEGASState  
NVZip Code  
89130-1725FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1622.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642012

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. QUINTANA, VIRGINIA, , MRS.,**

Mailing Address 6601 RANCHO SANTA FE DR.

City  
LAS VEGASState  
NVZip Code  
89130-1725FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1622.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642030

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

132.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 451 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. QUINTANA, VIRGINIA, , MRS.,**

Mailing Address 6601 RANCHO SANTA FE DR.

City  
LAS VEGASState  
NVZip Code  
89130-1725FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1622.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642091

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUINTANA, VIRGINIA, , MRS.,**

Mailing Address 6601 RANCHO SANTA FE DR.

City  
LAS VEGASState  
NVZip Code  
89130-1725FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1622.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642092

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. QUINTANA, VIRGINIA, , MRS.,**

Mailing Address 6601 RANCHO SANTA FE DR.

City  
LAS VEGASState  
NVZip Code  
89130-1725FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1622.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642094

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

127.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 452 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. QUINTANA, VIRGINIA, , MRS.,**

Mailing Address 6601 RANCHO SANTA FE DR.

City  
LAS VEGASState  
NVZip Code  
89130-1725FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1622.60

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025

Transaction ID : SA11A.27642101

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUINTANA, VIRGINIA, , MRS.,**

Mailing Address 6601 RANCHO SANTA FE DR.

City  
LAS VEGASState  
NVZip Code  
89130-1725FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1622.60

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025

Transaction ID : SA11A.27642106

Amount of Each Receipt this Period

79.20

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. QUINTANA, VIRGINIA, , MRS.,**

Mailing Address 6601 RANCHO SANTA FE DR.

City  
LAS VEGASState  
NVZip Code  
89130-1725FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1622.60

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025

Transaction ID : SA11A.27642111

Amount of Each Receipt this Period

83.28

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

214.53

TOTAL This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 453 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. QUINTANA, VIRGINIA, , MRS.,**

Mailing Address 6601 RANCHO SANTA FE DR.

City  
LAS VEGASState  
NVZip Code  
89130-1725FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1622.60

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642114**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUINTANA, VIRGINIA, , MRS.,**

Mailing Address 6601 RANCHO SANTA FE DR.

City  
LAS VEGASState  
NVZip Code  
89130-1725FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1622.60

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642120**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. QUINTANA, VIRGINIA, , MRS.,**

Mailing Address 6601 RANCHO SANTA FE DR.

City  
LAS VEGASState  
NVZip Code  
89130-1725FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1622.60

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642123**

Amount of Each Receipt this Period

83.28

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

197.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 454 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. QUINTANA, VIRGINIA, , MRS.,**

Mailing Address 6601 RANCHO SANTA FE DR.

City  
LAS VEGASState  
NVZip Code  
89130-1725FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1622.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642132**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RABE, KAREN, , ,**Mailing Address 27285 LAS RAMBLAS  
STE 240City  
MISSION VIEJOState  
CAZip Code  
92691-6325FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641738**

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RADY, PAUL, M., MR.,**

Mailing Address 4 MOCKINGBIRD LN

City  
ENGLEWOODState  
COZip Code  
80113-4813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ANTERO RESOURCESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

8901.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640653**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 455 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RADY, PAUL, M., MR.,**

Mailing Address 4 MOCKINGBIRD LN

City  
ENGLEWOODState  
COZip Code  
80113-4813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANTERO RESOURCESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8901.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640654

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RANSOM, JAMES, H., DR.,**

Mailing Address 319 WOODLAND RD.

City  
SEWICKLEYState  
PAZip Code  
15143-1048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640536

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. READ, THOMAS, , ,**

Mailing Address 114 LYNDBURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640506

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 456 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640508

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640512

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642653

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 457 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REAVIS, ROY, , ,**

Mailing Address 205 RUE SAINT BARTS

City  
YOUNGSVILLEState  
LAZip Code  
70592-5525FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642428**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REILLY, TOM, E., MR., JR.**

Mailing Address 8877 PICKWICK DRIVE

City  
INDIANAPOLISState  
INZip Code  
46260-1709FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641661**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICE, SUNDAY, , ,**

Mailing Address 2301 BROOKSTONE CENTRE PARKWAY

City  
COLUMBUSState  
GAZip Code  
31904-9248FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SUNDAY COSTOS RICEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642239**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 458 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICE, SUNDAY, , ,**

Mailing Address 2301 BROOKSTONE CENTRE PARKWAY

City  
COLUMBUSState  
GAZip Code  
31904-9248FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUNDAY COSTOS RICEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642240

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RICE, SUNDAY, , ,**

Mailing Address 2301 BROOKSTONE CENTRE PARKWAY

City  
COLUMBUSState  
GAZip Code  
31904-9248FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUNDAY COSTOS RICEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642241

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICE, SUNDAY, , ,**

Mailing Address 2301 BROOKSTONE CENTRE PARKWAY

City  
COLUMBUSState  
GAZip Code  
31904-9248FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUNDAY COSTOS RICEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642243

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

29.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 459 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICE, SUNDAY, , ,**

Mailing Address 2301 BROOKSTONE CENTRE PARKWAY

City  
COLUMBUSState  
GAZip Code  
31904-9248FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SUNDAY COSTOS RICEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642245**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RILEY, RENEE, , ,**

Mailing Address 14501 CANYON PASS ROAD

City  
AMARILLOState  
TXZip Code  
79118-4544FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MOORE COUNTY HOSPITAL DISTRICTOccupation (for Individual)  
ORTHOPEDIC SURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640901**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBERTS, GARY, D., MR.,**

Mailing Address 6206 APPIAN WAY

City  
RIVERSIDEState  
CAZip Code  
92506-4555FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642172**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

403.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 460 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBERTSON, ROBERT, , ,**

Mailing Address 97 WEST MAIN STREET APPT. 78

City  
NIANTICState  
CTZip Code  
06357-1732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640370

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642535

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROONEY, RANDALL, , ,**

Mailing Address 101 ONEILL CT

City  
FOLSOMState  
CAZip Code  
95630-2379FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641899

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.90



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 461 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROSE, BOWEN, , ,**

Mailing Address 105 E MAIN ST.

City  
EDNAState  
TXZip Code  
77957-2826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641103**

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROSE, BOWEN, , ,**

Mailing Address 105 E MAIN ST.

City  
EDNAState  
TXZip Code  
77957-2826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641106**

Amount of Each Receipt this Period

1.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROUDNER, LEONARD, , ,**

Mailing Address 14 SOUTH HIBISCUS DRIVE

City  
MIAMI BEACHState  
FLZip Code  
33139-5128FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

246.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641545**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 462 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROWLAND, WALTER, SPEED, MR.,**

Mailing Address 2501 WILLARD STREET

City  
WILMINGTONState  
DEZip Code  
19806-1237FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640991

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROY, JOSEPHINE, , ,**Mailing Address 1 OCEAN AVE  
APT #81City  
BELMARState  
NJZip Code  
07719-2054FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WEST NEW YORK BOARD OF EDOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641780

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641864

Amount of Each Receipt this Period

1.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 463 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642084

Amount of Each Receipt this Period

1.61

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642238

Amount of Each Receipt this Period

1.56

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642642

Amount of Each Receipt this Period

1.35

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 464 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUGGIERI, THOMAS, , MR.,**

Mailing Address 115 HAWTHORNE LN

City  
PHOENIXVILLEState  
PAZip Code  
19460-2731FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642385**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVERState  
NJZip Code  
08882-1908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642638**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUTHER, PATRICIA, M., ,**

Mailing Address 300 CHURCH ST

City  
MATAWANState  
NJZip Code  
07747-1522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641741**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 465 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SADAR, AMELIA, , MS.,**

Mailing Address 1604STONE MANSION DR.

City  
SEWICKLEYState  
PAZip Code  
15143-8601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640422

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SADAR, AMELIA, , MS.,**

Mailing Address 1604STONE MANSION DR.

City  
SEWICKLEYState  
PAZip Code  
15143-8601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641319

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAHAGIAN, ISHKHAN, K., MR.,**

Mailing Address 101 HIGH DESERT

City  
IRVINEState  
CAZip Code  
92602-1892FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642063

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 466 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDOVAL, LOUELLA, , ,**

Mailing Address 24366 EAST CANYON DRIVE

City  
AURORAState  
COZip Code  
80016-4413FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641740**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640650**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHULTZ, DONNA, I., MS.,**

Mailing Address 4801 ZINFANDEL LN

City  
BAKERSFIELDState  
CAZip Code  
93306-1859FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640843**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

291.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 467 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHWARTZ, JAMES, F., MR.,**

Mailing Address 60455 DESERT SHADOW DRIVE

City  
LA QUINTAState  
CAZip Code  
92253-7726FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641823

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHWAB, LOWELL, , ,**

Mailing Address 6255 MOHAWK DRIVE

City  
HAMELState  
MNZip Code  
55340-9708FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642567

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHWENZER, JOHN, , MR.,**

Mailing Address 4465 LAKEVIEW GLEN DR.

City  
MEDINAState  
OHZip Code  
44256-6510FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640820

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

240.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 468 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEGRAVES, GILDA, G., ,**

Mailing Address 14236 S SWAN RD

City  
GULFPORTState  
MSZip Code  
39503-9073FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

661.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641923

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEPHTON, GAYLE, , ,**

Mailing Address 150E LAKESHORE DR. #72

City  
LAKE ELSINOREState  
CAZip Code  
92530-4241FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641249

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEXTON, MARTHA, , ,**

Mailing Address 204 FOUNTAIN VIEW

City  
SHREVEPORTState  
LAZip Code  
71118-2972FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640844

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 469 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHEA, JAMES, , ,**

Mailing Address 174 CABOT ST

City  
WEST BABYLONState  
NYZip Code  
11704-1121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SHEA TRUCKINGOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641253**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHEA, JAMES, , ,**

Mailing Address 174 CABOT ST

City  
WEST BABYLONState  
NYZip Code  
11704-1121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SHEA TRUCKINGOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642149**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640572**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 470 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIMKINS, BRYAN, , ,**

Mailing Address 3025 CARDINAL DRIVE

City  
AUGUSTAState  
GAZip Code  
30909-3039FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640861

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIMKINS, BRYAN, , ,**

Mailing Address 3025 CARDINAL DRIVE

City  
AUGUSTAState  
GAZip Code  
30909-3039FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640893

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIMKINS, BRYAN, , ,**

Mailing Address 3025 CARDINAL DRIVE

City  
AUGUSTAState  
GAZip Code  
30909-3039FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640898

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 471 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIMKINS, BRYAN, , ,**

Mailing Address 3025 CARDINAL DRIVE

City  
AUGUSTAState  
GAZip Code  
30909-3039FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640902

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIMKINS, BRYAN, , ,**

Mailing Address 3025 CARDINAL DRIVE

City  
AUGUSTAState  
GAZip Code  
30909-3039FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641605

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIMONS, CANDY, , ,**

Mailing Address 426 HOFFMAN RD

City  
BASTROPState  
TXZip Code  
78602-2670FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641690

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

204.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 472 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINCLAIR, PATRICIA, N., MRS.,**

Mailing Address 1739 N TULARE WAY

City  
UPLANDState  
CAZip Code  
91784-1961FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641202**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIVAN, MIRA, , ,**

Mailing Address 5851 S. VICKERY ST

City  
CUMMINGState  
GAZip Code  
30040-8793FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OPTOMETRIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642075**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIWIK, DEBORAH, , ,**

Mailing Address 1750 5TH STREET DR. NW

City  
HICKORYState  
NCZip Code  
28601-5206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

482.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641049**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

261.45

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 473 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, DENNIS, , ,**

Mailing Address 34073 EAST 740 ROAD

City  
WAGONERState  
OKZip Code  
74467-9433FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.08

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641079**

Amount of Each Receipt this Period

0.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, DENNIS, , ,**

Mailing Address 34073 EAST 740 ROAD

City  
WAGONERState  
OKZip Code  
74467-9433FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.08

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641082**

Amount of Each Receipt this Period

0.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, LINDA, NESTOR, ,**

Mailing Address 700 PENN CENTER BLVD APT 403

LAUREL VILLAGE APTS

City  
PITTSBURGHState  
PAZip Code  
15235-5916FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

273.59

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640769**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 474 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, MARY, L., ,**

Mailing Address 2939 QUENLEY ST

City  
SAINT CHARLESState  
MOZip Code  
63301-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641155

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, RAYMOND, L., DR.,**

Mailing Address 2210 BRESSLER DRIVE

City  
WYOMISSINGState  
PAZip Code  
19610-1506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TOWERHEALTHOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640906

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, RON, , ,**

Mailing Address P.O. BOX 898

City  
BANNER ELKState  
NCZip Code  
28604-0898FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1028.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642658

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 475 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642367

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SNEDDEN, ALBERT, , ,**

Mailing Address 1165 FAIRFIELD LN

City  
SEBASTIANState  
FLZip Code  
32958-5965FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641200

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SNYDER, LEE, , ,**

Mailing Address 279 LONE OAK ROAD

City  
RANSONState  
WVZip Code  
25438-5614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SNYDER ENVIRONMENTALOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641793

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

172.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 476 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SODITUS, CONSTANCE, A., ,**

Mailing Address 21608 O. LANE. APT. 116

City  
OCEAN PARKState  
WAZip Code  
98640-3225FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.70

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640567**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOERTEL, GREGG, S., MR.,**

Mailing Address 116 SOUTHERN VALLEY CT

City  
MARSState  
PAZip Code  
16046-9306FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PPM CONSULTINGOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.88

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640369**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641273**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.53



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 477 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640393

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641725

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SORENSEN, MONTE, , ,**

Mailing Address 1946 DEERWOOD TRL

City  
KRONENWETTERState  
WIZip Code  
54455-8071FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

496.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641398

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

162.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 478 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640648**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641123**

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 479 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641125

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641128

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, STANLEY, S., MR.,**

Mailing Address 5744 REPUBLIC OF TEXAS BLVD

City  
AUSTINState  
TXZip Code  
78735-6512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641934

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 480 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STORMENT, JOHN, B., MR.,**Mailing Address 6202 E MCKELLIPS RD  
UNIT 224City  
MESAState  
AZZip Code  
85215-2876FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640909

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STORMENT, JOHN, B., MR.,**Mailing Address 6202 E MCKELLIPS RD  
UNIT 224City  
MESAState  
AZZip Code  
85215-2876FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642043

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOUT, GREGORY, , ,**

Mailing Address 1747 TOMMY AARON DR

City  
EL PASOState  
TXZip Code  
79936-4621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

392.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640706

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 481 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STREBECK, JULIA, , ,**

Mailing Address 5315 CR 922

City  
NEVADAState  
TXZip Code  
75173-6161FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641574**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STREET, PATRICIA, , ,**

Mailing Address 3804 AURORA CT.

City  
HALTOM CITYState  
TXZip Code  
76117-2708FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640824**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRUEBING, SCOTT, , ,**

Mailing Address 229 E 5TH ST #2

City  
SHAWANOState  
WIZip Code  
54166-2045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CAMPING WORLDOccupation (for Individual)  
BDA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640490**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 482 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STUDINKA, JOYCE, , ,**

Mailing Address 145 WOODMONT DR

City  
BIRMINGHAMState  
ALZip Code  
35209-6627FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641259**

Amount of Each Receipt this Period

1.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STUDINKA, JOYCE, , ,**

Mailing Address 145 WOODMONT DR

City  
BIRMINGHAMState  
ALZip Code  
35209-6627FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641260**

Amount of Each Receipt this Period

0.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUDOL, JEAN, , ,**

Mailing Address 2640 GATELY DRIVE WEST

City  
WEST PALM BEACHState  
FLZip Code  
33415-7996FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640443**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 483 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SZALOCZI, IRENE, , ,**

Mailing Address 27 GRACE ST

City  
FORDSState  
NJZip Code  
08863-2101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642256**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TARR, ANNE, , ,**

Mailing Address 13306 SOUTHWALK

City

SAN ANTONIO

State

TX

Zip Code

78232-4843

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

987.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640515**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THATCHER, PATRICIA, , ,**

Mailing Address 318 ROSEMARY ST

City

SMYRNA

State

TN

Zip Code

37167-5257

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

324.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640555**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 484 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TIFFAN, GERALD, L., ,**

Mailing Address 1061 GALLEON DRIVE

City  
NAPLESState  
FLZip Code  
34102-7705FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641852**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TITUS, ALDONA, , ,**

Mailing Address 7214 WEST CROSS CREEK TRAIL

City  
BRECKSVILLEState  
OHZip Code  
44141-3143FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641419**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRAN, TUAN, , ,**

Mailing Address 9041 GREENVILL AVE.

City  
WESTMINSTERState  
CAZip Code  
92683-5514FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IHSSOccupation (for Individual)  
PRAYER; WORKER; WRITER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

271.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640459**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 485 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TUCKER, BRYAN, , MR.,**

Mailing Address P.O. BOX 84519

City  
PEARLANDState  
TXZip Code  
77584-0011FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ONLINE DIRECTIONALOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641445

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TULLAI, SARAH, L., MRS.,**

Mailing Address 14900 W GOLDWATER RIDGE DR.

City  
SURPRISEState  
AZZip Code  
85374-9551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642639

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TUNALI, ANN, , ,**

Mailing Address 7511 AUDEN TRAIL

City  
ATLANTAState  
GAZip Code  
30350-5002FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

353.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641579

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 486 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UMBARGER, BRENDA, L., ,**

Mailing Address P.O. BOX 1774

City  
FRITCHState  
TXZip Code  
79036-1774FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641863**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. UNDERWOOD, BARBARA, , ,**

Mailing Address 700 CRESTVIEW DRIVE

City  
WOOD RIVERState  
ILZip Code  
62095-3378FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641092**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN SANT, BILL, , ,**

Mailing Address 85050 LAKESHORE DR.

City  
BAYFIELDState  
WIZip Code  
54814-4506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TJM CAPITAL PARTNERSOccupation (for Individual)  
OPERATING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.53

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641726**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

179.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 487 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN SANT, BILL, , ,**

Mailing Address 85050 LAKESHORE DR.

City  
BAYFIELDState  
WIZip Code  
54814-4506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TJM CAPITAL PARTNERSOccupation (for Individual)  
OPERATING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641728

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAN SANT, BILL, , ,**

Mailing Address 85050 LAKESHORE DR.

City  
BAYFIELDState  
WIZip Code  
54814-4506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TJM CAPITAL PARTNERSOccupation (for Individual)  
OPERATING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641732

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VASEK, GARY, R., MR.,**

Mailing Address 6387 ASHCROFT DR.

City  
COLORADO SPRINGSState  
COZip Code  
80918-3241FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640737

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

97.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 488 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VINE, ROSALYNN, , MS.,**

Mailing Address 45 BINSTED DR.

City  
MEDFORDState  
NJZip Code  
08055-9561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640911**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VITALI, SONYA, , ,**

Mailing Address 9888 EAST LEGEND COURT

City  
GOLD CANYONState  
AZZip Code  
85118-5891FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640507**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640447**

Amount of Each Receipt this Period

7.77

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 489 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** VO, HONG, , ,

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640537

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** VO, HONG, , ,

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640582

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** VO, HONG, , ,

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642233

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 490 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VOWELL, BELITA, J., MRS.,**

Mailing Address 508 GRASSMEADE COVE

City  
CORDOVAState  
TNZip Code  
38018-7670FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641565**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VOWELL, BELITA, J., MRS.,**

Mailing Address 508 GRASSMEADE COVE

City  
CORDOVAState  
TNZip Code  
38018-7670FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641585**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALKER, JON, C., MR.,**

Mailing Address 7171 N. HILLSIDE DR.

City  
PARADISE VALLEYState  
AZZip Code  
85253-2865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UNION LIFE & CASUALTYOccupation (for Individual)  
UNION LIFE & CASUALTY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640885**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1070.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 491 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALKER, LUCINDA, , ,**

Mailing Address 67 IRVING AVENUE, P.O. BOX 507

City  
HYANNIS PORTState  
MAZip Code  
02647-0507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642332**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKINGTON, PAT, , ,**

Mailing Address 11765 N 135TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-3633FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641242**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALKINGTON, PAT, , ,**

Mailing Address 11765 N 135TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-3633FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

718.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641268**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.77

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 492 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALLS, DIANE JANE, , ,**

Mailing Address 1882 VISTA HILLS DR.

City  
NAVASOTAState  
TXZip Code  
77868-6966FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.50

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27640697**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATERS, TIM, , ,**

Mailing Address 4318 WINDWILLOW LN

City  
CLERMONTState  
FLZip Code  
34714-6277FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.94

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642190**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELLS, JOSEPH, , MR., JR.**Mailing Address 151 FAIRVIEW DR.  
APT 358City  
LITITZState  
PAZip Code  
17543-8164FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27642144**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

138.08



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 493 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WETZEL, JOAN, C., MS.,**

Mailing Address 2508 PINE ST. APT. F

City  
NEW ORLEANSState  
LAZip Code  
70125-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.36

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641827**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WETZEL, JOAN, C., MS.,**

Mailing Address 2508 PINE ST. APT. F

City  
NEW ORLEANSState  
LAZip Code  
70125-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.36

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641844**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHEELER, EILEEN, , ,**

Mailing Address IN176 PAPWORTH

City  
CAROL STREAMState  
ILZip Code  
60188-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

342.04

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2025**Transaction ID : SA11A.27641552**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 494 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITE, LINDA, , ,**

Mailing Address 4433 MOCKINGBIRD LN

City  
DALLASState  
TXZip Code  
75205-2617FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640681

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITE, STEPHEN, , ,**

Mailing Address 9345 OSAGE CIRCLE

City  
GARDEN RIDGEState  
TXZip Code  
78266-2060FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641190

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITTAKER, JERRY, , ,**

Mailing Address 45 CRABLINE COURT

City  
HILTON HEADState  
SCZip Code  
29928-3539FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642194

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

184.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 495 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, MIKE, , ,**

Mailing Address 3003 CANEMILL RD IN

City  
LANCASTERState  
SCZip Code  
29720-9569FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640826

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, WILLIAM, G., MR.,**

Mailing Address 3420 BLACKBURN ST.

City  
DALLASState  
TXZip Code  
75219-4434FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642072

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, AUDREY, , ,**

Mailing Address 5216 N MALLORCA WAY

City  
MERIDIANState  
IDZip Code  
83646-7473FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642055

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 496 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINTERS, DONNA, , ,**

Mailing Address 3560 HIGHWAY 134

City  
LAKE PROVIDENCEState  
LAZip Code  
71254-4418FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641831

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINTER, ROBERT, E., MR.,**

Mailing Address 21120 VISTA AMOROSA CT

City  
PINE GROVEState  
CAZip Code  
95665-9481FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641352

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOLF, WALTER, W., MR.,**

Mailing Address 1813 VIEWCREST LANE

City  
SPOKANE VALLEYState  
WAZip Code  
99212-3216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640569

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

239.10

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 497 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WOODRUFF, RICHARD, , ,

Mailing Address 5430 NEW NORTHSIDE DR.  
SUITE 200

City  
ATLANTA

State  
GA

Zip Code  
30339-7424

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HONDA CARLAND

Occupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641241

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOODRUFF, RICHARD, , ,

Mailing Address 5430 NEW NORTHSIDE DR.  
SUITE 200

City  
ATLANTA

State  
GA

Zip Code  
30339-7424

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HONDA CARLAND

Occupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641245

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WORSDELL, TERRY, , ,

Mailing Address 1840 PARK NEWPORT DRIVE, #201

City  
NEWPORT BEACH

State  
CA

Zip Code  
92660-5054

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
CPS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640692

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

88.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 498 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, SCOTT, , ,**

Mailing Address 6679 BRAEMAR AVE. S

City  
NOBLESVILLEState  
INZip Code  
46062-8441FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LIBERTYOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27640990**

Amount of Each Receipt this Period

80.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27641636**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025**Transaction ID : SA11A.27642281**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

255.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 499 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNGE, BRIAN, , MR.,**

Mailing Address 110 E CENTER ST

City  
MADISONState  
SDZip Code  
57042-2908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27640812

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNGBLUT, JOANNE, M., DR.,**

Mailing Address 1655 KNUDSON RUN

City  
THE VILLAGESState  
FLZip Code  
32163-5415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641371

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZELLMER, GENE, , ,**

Mailing Address 25845 S. CARMEL HILLS DR.

City  
CARMELState  
CAZip Code  
93923-8310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

366.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642615

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

21.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 500 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZELMER, GENE, , ,**

Mailing Address 25845 S. CARMEL HILLS DR.

City  
CARMELState  
CAZip Code  
93923-8310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27642616

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZIOMEK, HEIDI, , ,**

Mailing Address 227 TRAFALGAR LANE

City  
SAN CLEMENTEState  
CAZip Code  
92672-5482FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2025

Transaction ID : SA11A.27641105

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11C.27642708

Amount of Each Receipt this Period

64190.50

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 501 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADAMS, CHARLES, , MR.,**

Mailing Address 1933 HARMONY DRIVE

City  
FORT COLLINSState  
COZip Code  
80525-3471FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644690**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.47

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643619**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADIS, LEONARD, , ,**

Mailing Address 187 PANDOLFI AVENUE

City  
SECAUCUSState  
NJZip Code  
07094-3135FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643184**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 502 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADIS, LEONARD, , ,**

Mailing Address 187 PANDOLFI AVENUE

City  
SECAUCUSState  
NJZip Code  
07094-3135FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643760

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALBRIGHT, FREDERICK, , MR.,**

Mailing Address 19 ADMIRAL ROAD

City  
MASSAPEQUAState  
NYZip Code  
11758-7816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642836

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALBRIGHT, FREDERICK, , MR.,**

Mailing Address 19 ADMIRAL ROAD

City  
MASSAPEQUAState  
NYZip Code  
11758-7816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

292.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643600

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

191.15

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 503 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLE

State  
LA

Zip Code  
70769-4474

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.65

Date of Receipt

**02** / **02** / **2025**

**Transaction ID : SA11A.27643071**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLE

State  
LA

Zip Code  
70769-4474

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.65

Date of Receipt

**02** / **02** / **2025**

**Transaction ID : SA11A.27643073**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALL

State  
TX

Zip Code  
75087-2429

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.88

Date of Receipt

**02** / **02** / **2025**

**Transaction ID : SA11A.27644603**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

31.62

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 504 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, JANET, , MS.,**

Mailing Address 2905 MOCKINGBIRD TRL

City  
CASPER

State  
WY

Zip Code  
82604-3641

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.42

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27644639**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ASHWORTH, DEAN, , ,**

Mailing Address 12625 N. 18TH PL.

City  
PHOENIX

State  
AZ

Zip Code  
85022-5737

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27644150**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAMERT, TOM, , ,**

Mailing Address BOX 336

City  
IONE

State  
CA

Zip Code  
95640-0336

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1402.91

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27643500**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

86.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 505 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAMERT, TOM, , ,**

Mailing Address BOX 336

City  
IONEState  
CAZip Code  
95640-0336FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1402.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643513

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARBIN, LOUIS, , ,**

Mailing Address 132 ROYAL LN

City  
POOLERState  
GAZip Code  
31322-3958FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642711

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARILLARO, MARYANN, , MS.,**Mailing Address 130 WATER ST  
APT 1ACity  
NEW YORKState  
NYZip Code  
10005-1622FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

681.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643902

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 506 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARNES, PAUL, , ,**

Mailing Address 338 SUNSHINE WAY

City  
TURLOCKState  
CAZip Code  
95382-7373FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643795**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BASABE, FABIAN, , ,**Mailing Address 200 BISCAYNE BOULEVARD WAY  
APT 4305City  
MIAMIState  
FLZip Code  
33131-2164FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643901**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEAUDOIN, ROBERT, P., MR.,**

Mailing Address 2673 TORREY PINES DR

City  
BRENTWOODState  
CAZip Code  
94513-7089FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643529**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 507 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BELMONTE, JEAN, R., MRS.,**

Mailing Address 613 CUSTIS ROAD

City  
GLENSIDEState  
PAZip Code  
19038-2013FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643565**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BENSON, ELIZABETH, , ,**Mailing Address 200 N OCEAN BLVD  
9NCity  
DELRAY BEACHState  
FLZip Code  
33483-7178FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643475**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643598**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 508 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BISHOP, GLORIA, , ,**

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGOState  
ORZip Code  
97034-7595FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643511

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BISHOP, GLORIA, , ,**

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGOState  
ORZip Code  
97034-7595FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643519

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLACKMON, HARRY, , ,**

Mailing Address 708 PISGAH RD.

City  
FLORENCEState  
SCZip Code  
29501-6703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643145

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 509 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOBZIEN, ANN, , ,**

Mailing Address 52 RAVEN DRIVE

City  
ROCKY POINTState  
NCZip Code  
28457-9440FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644261

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOBZIEN, ANN, , ,**

Mailing Address 52 RAVEN DRIVE

City  
ROCKY POINTState  
NCZip Code  
28457-9440FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644265

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOONE, STEPHEN, , ,**

Mailing Address POST OFFICE BOX12600

City  
OLYMPIAState  
WAZip Code  
98508-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

331.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643302

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

151.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 510 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOONE, STEPHEN, , ,**

Mailing Address POST OFFICE BOX12600

City  
OLYMPIAState  
WAZip Code  
98508-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643312

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOONE, STEPHEN, , ,**

Mailing Address POST OFFICE BOX12600

City  
OLYMPIAState  
WAZip Code  
98508-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643318

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644447

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

328.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 511 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYD, BONNIE, J., ,**

Mailing Address 8656 SUNNYSLOPE DR.

City  
SAN GABRIELState  
CAZip Code  
91775-1129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644711

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, JULIA, , ,**

Mailing Address 25 HALDY AVE.

City  
COLUMBUSState  
OHZip Code  
43204-2656FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644313

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYER, RICHARD, P., DR.,**

Mailing Address 9303 HAVENBROOKE WAY

City  
KNOXVILLEState  
TNZip Code  
37922-4269FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NEUROSURGICAL ASSOCIATES, PCOccupation (for Individual)  
NEUROSURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642968

Amount of Each Receipt this Period

130.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

257.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 512 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRADFORD, MARILYN, , ,**

Mailing Address PO BOX 645

City  
KILAUEAState  
HIZip Code  
96754-0645FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644633**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRADLEY, MOLLY, , ,**

Mailing Address 2705 BIRMINGHAM

City

BIRMINGHAM

State

AL

Zip Code

35243-

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644718**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, SHERRI, , ,**

Mailing Address 5834 E LEISURE LANE

City

CAVE CREEK

State

AZ

Zip Code

85331-9102

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644588**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

218.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 513 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRUMBAUGH, PHILIP, C., MR.,**

Mailing Address 108 PHILIP DR

City  
WEST MILTONState  
OHZip Code  
45383-1330FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642773

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUNN, DANIEL, W., MR.,**

Mailing Address P.O. BOX 5005 PMB 116

City  
RANCHO SANTA FEState  
CAZip Code  
92067-5005FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DANIEL W. BUNNOccupation (for Individual)  
INVESTORS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642845

Amount of Each Receipt this Period

52.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURCH, JUDITH, , MS.,**

Mailing Address P.O. BOX 1

City  
BRUSSELSState  
ILZip Code  
62013-0001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642989

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

187.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 514 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURCH, JUDITH, , MS.,**

Mailing Address P.O. BOX 1

City  
BRUSSELSState  
ILZip Code  
62013-0001FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642996**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURCHER, PAT, , ,**

Mailing Address 3700 LAKE POWHATAN

City  
WILLIAMSBURGState  
VAZip Code  
23188-8035FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642875**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURCHER, PAT, , ,**

Mailing Address 3700 LAKE POWHATAN

City  
WILLIAMSBURGState  
VAZip Code  
23188-8035FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

507.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643204**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

187.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 515 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURNS, MICHAEL, J., ,**

Mailing Address 7287 HORIZON DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644549**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUSING, DON, , ,**

Mailing Address 6919 NUNN ROAD

City  
LAKELANDState  
FLZip Code  
33813-3821FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643569**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BYRUM, LYLE, , MR.,**

Mailing Address 7007 BOEING

City  
EL PASOState  
TXZip Code  
79925-1109FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ATI JET INC.Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643216**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

324.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 516 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643006**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, FRANCIS, C., MR.,**

Mailing Address 5432 S SALVATION PL.

City  
SIOUX FALLSState  
SDZip Code  
57108-8543FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643453**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNES, CALLAND, , ,**

Mailing Address 11078 SAFFOLD WAY

City  
RESTONState  
VAZip Code  
20190-3812FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

629.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644017**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

165.13



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 517 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643851

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643854

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643855

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 518 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643235

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643492

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643534

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 519 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643589

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARROLL, SHIRLEY, , ,**

Mailing Address 1509 MOSSWOOD LANE

City  
WOODSTOCKState  
GAZip Code  
30189-6811FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
METRO RESAOccupation (for Individual)  
SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642876

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CASSENTI, JEAN, , ,**

Mailing Address 29 ARNOLD DR

City  
TOLLANDState  
CTZip Code  
06084-2810FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

583.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644035

Amount of Each Receipt this Period

1.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 520 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CASSENTI, JEAN, , ,**

Mailing Address 29 ARNOLD DR

City  
TOLLANDState  
CTZip Code  
06084-2810FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644036

Amount of Each Receipt this Period

0.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642899

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643420

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 521 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CERNUDA, HERMINIO, L., MR.,**

Mailing Address 5320 SW 5TH TER

City  
CORAL GABLESState  
FLZip Code  
33134-1126FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643457**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHAKNIS, GEORGE, , ,**

Mailing Address 616 SEA OATS DR

City  
DESTINState  
FLZip Code  
32541-2418FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642868**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAKNIS, GEORGE, , ,**

Mailing Address 616 SEA OATS DR

City  
DESTINState  
FLZip Code  
32541-2418FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644595**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 522 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANDRA, HAROLD, , ,**

Mailing Address 132 OLD LAKE ST

City  
WEST HARRISONState  
NYZip Code  
10604-1611FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643424

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANG, KAREN, , ,**

Mailing Address 1221 VICTORIA STREET

City  
HONOLULUState  
HIZip Code  
96814-1430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642954

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHESTNEY, CYNTHIA, , ,**

Mailing Address 4120 LYNDALE ROAD

City  
ALTOONAState  
PAZip Code  
16602-1537FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642842

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

184.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 523 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHRISTIANSEN, ALAN, L., MR.,**

Mailing Address 12121 W. WILMINGTON RD.

City  
PEOTONEState  
ILZip Code  
60468-9726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643062**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHRISTIE, JOHN, , ,**

Mailing Address 1575 HERITAGE DR, STE 107

City  
MCKINNEYState  
TXZip Code  
75069-3395FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

698.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644322**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHRISTIAN, SUSAN, A., MRS.,**

Mailing Address 2828 ASH MILL RD

City  
DOYLESTOWNState  
PAZip Code  
18902-1931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

577.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642851**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.05

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 524 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CIACCIO, JANE, , ,**

Mailing Address **5491 BEECHMONT AVE**  
**APT 506**

City  
**CINCINNATI**

State  
**OH**

Zip Code  
**45230-1160**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**841.25**

Date of Receipt

**02 / 02 / 2025**

**Transaction ID : SA11A.27642992**

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CIMINO, SHIRLEY, R., MS.,**

Mailing Address **44600 MONTEREY AVE. APT. A219**

City  
**PALM DESERT**

State  
**CA**

Zip Code  
**92260-3368**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**549.24**

Date of Receipt

**02 / 02 / 2025**

**Transaction ID : SA11A.27644648**

Amount of Each Receipt this Period

**36.44**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLARK, BARBARA, W., MRS.,**

Mailing Address **1170 GORDON COMBS RD NW**

City  
**MARIETTA**

State  
**GA**

Zip Code  
**30064-1226**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ELEGANT IDEAS INC.**

Occupation (for Individual)  
**PRESIDENT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**562.22**

Date of Receipt

**02 / 02 / 2025**

**Transaction ID : SA11A.27643641**

Amount of Each Receipt this Period

**1.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**72.44**



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 525 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLARK, BARBARA, W., MRS.,**

Mailing Address 1170 GORDON COMBS RD NW

City  
MARIETTAState  
GAZip Code  
30064-1226FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ELEGANT IDEAS INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643646

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, BARBARA, W., MRS.,**

Mailing Address 1170 GORDON COMBS RD NW

City  
MARIETTAState  
GAZip Code  
30064-1226FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ELEGANT IDEAS INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643651

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLARK, BARBARA, W., MRS.,**

Mailing Address 1170 GORDON COMBS RD NW

City  
MARIETTAState  
GAZip Code  
30064-1226FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ELEGANT IDEAS INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

562.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644636

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 526 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLARK, JERALD, L., MR.,**

Mailing Address 3530 T STREET NW

City  
WASHINGTONState  
DCZip Code  
20007-2217FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CLARK ASSOCIATES ARCHITECTSOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644197

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLEMENTS, ASHLEY, , ,**

Mailing Address 3950 WHEELER ROAD

City  
BAY CITYState  
MIZip Code  
48706-1857FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CLEMENTS CONTRACTINGOccupation (for Individual)  
OFFICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642937

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINGSWORTH, JACK, , ,**

Mailing Address 20391 HOHOKAM CT

City  
APPLE VALLEYState  
CAZip Code  
92308-5112FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643539

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

196.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 527 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONRAD, STUART, W., MR.,**

Mailing Address 8522 FREDERICK DR.

City  
DE SOTOState  
KSZip Code  
66018-7110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.00

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27642890**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONSTANTINE, RUSSELL, , ,**

Mailing Address 209 ROBIN HOOD DR

City  
COVINGTONState  
LAZip Code  
70433-4762FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.66

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644705**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COPELAND, LAMMOT, , ,**

Mailing Address P.O. BOX 1992

City  
WILMINGTONState  
DEZip Code  
19899-1992FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ASSOCIATES INTERNATIONALOccupation (for Individual)  
BUS.EXEC.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

637.17

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643522**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 528 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORTNER, DIANE, , ,**

Mailing Address 4849 FLORIDA AVE NORTH

City  
MINNEAPOLISState  
MNZip Code  
55428-4609FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643673

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COSENTINO, LOUIS, , ,**

Mailing Address 2759 RHONE DR

City  
PALM BEACH GARDENSState  
FLZip Code  
33410-1203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643259

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643792

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 529 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIGO, JACQUELINE, L., MS.,**

Mailing Address 1049 SUMMIT DR

City  
MOUNT VERNONState  
OHZip Code  
43050-9576FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1371.80

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644297**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTONState  
IAZip Code  
50131-4796FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644271**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTONState  
IAZip Code  
50131-4796FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644273**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 530 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTONState  
IAZip Code  
50131-4796FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644276

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTONState  
IAZip Code  
50131-4796FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644279

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTONState  
IAZip Code  
50131-4796FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644280

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 531 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTONState  
IAZip Code  
50131-4796FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644282

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CUELLAR, IGNACIO, , ,**

Mailing Address 305 DEERWOOD DRIVE

City  
SAN MARCOSState  
TXZip Code  
78666-1216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644662

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURRIE, RODNEY, , ,**

Mailing Address 19 LAKE ROAD

City  
BRENTWOODState  
NHZip Code  
03833-6243FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ALLTECH RESOURCES, LLC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643596

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 532 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURRY, ROBERT, J., ,**

Mailing Address 1205 ANDTE CIR.

City  
CLAREMOREState  
OKZip Code  
74017-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643059**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURTIN, DINO, ALLEN, MR.,**

Mailing Address 228 U ST

City  
RIO LINDAState  
CAZip Code  
95673-1337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1405.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643369**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. D'ARMOND, DAVID, B., ,**

Mailing Address 2800 VIA ROSSO ST UNIT 502

City  
SPRINGFIELDState  
ILZip Code  
62703-6803FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

379.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643438**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.56



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 533 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. D'ARMOND, DAVID, B., ,**

Mailing Address 2800 VIA ROSSO ST UNIT 502

City  
SPRINGFIELDState  
ILZip Code  
62703-6803FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643448**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DANSE, ILENE, , MS.,**

Mailing Address P.O. BOX 830249

City  
RICHARDSONState  
TXZip Code  
75083-0249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643594**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DARLING, GARY, , ,**

Mailing Address 501 E GUIDRY ST

City  
COVINGTONState  
LAZip Code  
70433-3942FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

568.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642784**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 534 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAVIS, CLAUDE, A., ,**

Mailing Address 6752 TAYLOR WOODS LN

City  
PLEASANT GARDENState  
NCZip Code  
27313-8139FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

RETAIL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.41

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643111**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAVIS, CLAUDE, A., ,**

Mailing Address 6752 TAYLOR WOODS LN

City  
PLEASANT GARDENState  
NCZip Code  
27313-8139FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

RETAIL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.41

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643114**

Amount of Each Receipt this Period

10.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAVIS, REBECCA, , ,**

Mailing Address 15805 20TH AVE CT. E

City  
TACOMAState  
WAZip Code  
98445-6011FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.82

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643899**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 535 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAY, MICHAEL, F., ,**

Mailing Address 253 FARR AVE

City  
WADSWORTHState  
OHZip Code  
44281-2146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MDE,LLCOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642791**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEAL, JERRY, , ,**

Mailing Address 2929 ONATE ROAD

City  
LAS CRUCESState  
NMZip Code  
88007-8117FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643016**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEGROOT, PAUL, , ,**

Mailing Address 1S500 FAIRVIEW AVE

City  
LOMBARDState  
ILZip Code  
60148-5017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1548.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642834**

Amount of Each Receipt this Period

69.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.74

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 536 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEL ROSSO, NITA, , ,**

Mailing Address 3244 E WICKIEUP LN

City  
PHOENIX

State  
AZ

Zip Code  
85050-7915

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.30

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27644635**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEL ROSSO, NITA, , ,**

Mailing Address 3244 E WICKIEUP LN

City  
PHOENIX

State  
AZ

Zip Code  
85050-7915

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.30

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27644637**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DELISLE, CYNTHIA, , ,**

Mailing Address 5850 NW 165TH ST

City  
TRENTON

State  
FL

Zip Code  
32693-7844

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

479.61

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27643275**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

33.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 537 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DELISLE, CYNTHIA, , ,**

Mailing Address 5850 NW 165TH ST

City  
TRENTONState  
FLZip Code  
32693-7844FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643282

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DELISLE, CYNTHIA, , ,**

Mailing Address 5850 NW 165TH ST

City  
TRENTONState  
FLZip Code  
32693-7844FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643292

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DELISLE, CYNTHIA, , ,**

Mailing Address 5850 NW 165TH ST

City  
TRENTONState  
FLZip Code  
32693-7844FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

479.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643299

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 538 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DELISLE, CYNTHIA, , ,**

Mailing Address 5850 NW 165TH ST

City  
TRENTONState  
FLZip Code  
32693-7844FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643301**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DELISLE, CYNTHIA, , ,**

Mailing Address 5850 NW 165TH ST

City  
TRENTONState  
FLZip Code  
32693-7844FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643306**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DELISLE, CYNTHIA, , ,**

Mailing Address 5850 NW 165TH ST

City  
TRENTONState  
FLZip Code  
32693-7844FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

479.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643311**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

67.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 539 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEYARMAN, GERALDINE, M., ,**

Mailing Address 2543 GRADWOHL RD

City  
TOLEDOState  
OHZip Code  
43617-1808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644519

Amount of Each Receipt this Period

18.74

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIDOMINICIS, JUDITH, A., ,**

Mailing Address 224E SPRINGMEADOW DR.

City  
HOLBROOKState  
NYZip Code  
11741-4129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643024

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIDOMINICIS, JUDITH, A., ,**

Mailing Address 224E SPRINGMEADOW DR.

City  
HOLBROOKState  
NYZip Code  
11741-4129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643049

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

88.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 540 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DILORENZO, ESTHER, , ,**

Mailing Address 46309 CORDOBA DRIVE

City  
NOVIState  
MIZip Code  
48374-2435FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643365**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIPASQUALE, KRISTOFFER, , ,**

Mailing Address 37 WOODROW STREET

City  
HUDSONState  
MAZip Code  
01749-2811FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643495**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DITTMAR, CECI, , ,**

Mailing Address 102 OLD COURSE LANE

City  
MC CORMICKState  
SCZip Code  
29835-3216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644304**

Amount of Each Receipt this Period

34.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.18



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 541 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DRAZAN, ARTHUR, D., ,**

Mailing Address 330 EAGLE DRIVE

City  
JUPITERState  
FLZip Code  
33477-4066FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.37

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644557

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNN, BILL, , , JR.**

Mailing Address 5300 MISSION WOODS RD

City  
SHAWNEE MISSIONState  
KSZip Code  
66205-2008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643863

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUPUIS, DANIELLE, , MS.,**

Mailing Address 153 8TH ST

City  
WIND GAPState  
PAZip Code  
18091-1023FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTURY WIRE PRODUCTS CORP.Occupation (for Individual)  
OWNER/PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

380.91

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644419

Amount of Each Receipt this Period

98.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

392.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 542 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EACK, CRYSTAL, , ,**

Mailing Address 691 IONE AVENUE NORTHEAST

City  
SPRING LAKE PARKState  
MNZip Code  
55432-1146FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642758**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643638**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ECHOLS, DON, , ,**

Mailing Address 3461 JERROLD BLVD

City  
BRUNSWICKState  
OHZip Code  
44212-2225FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

416.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643623**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 543 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELAS BOADO, MARIO, , ,**

Mailing Address 40120 SAGEWOOD DR

City  
PALM DESERTState  
CAZip Code  
92260-2321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642979**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELAS BOADO, MARIO, , ,**

Mailing Address 40120 SAGEWOOD DR

City  
PALM DESERTState  
CAZip Code  
92260-2321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644218**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMMONS, VICTORIA, , ,**

Mailing Address 142 GILES AVE

City  
MIDDLESEXState  
NJZip Code  
08846-1901FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WHOLE FOODS MARKETOccupation (for Individual)  
SHOPPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644527**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

67.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 544 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** ENDO, YOI, , ,

Mailing Address 1273 ALA NAPUNANI ST.

City  
HONOLULUState  
HIZip Code  
96818-1626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643106

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** ENDO, YOI, , ,

Mailing Address 1273 ALA NAPUNANI ST.

City  
HONOLULUState  
HIZip Code  
96818-1626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643108

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** ENDO, YOI, , ,

Mailing Address 1273 ALA NAPUNANI ST.

City  
HONOLULUState  
HIZip Code  
96818-1626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

445.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643110

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 545 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENDO, YOI, , ,**

Mailing Address 1273 ALA NAPUNANI ST.

City  
HONOLULUState  
HIZip Code  
96818-1626FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643113**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENDO, YOI, , ,**

Mailing Address 1273 ALA NAPUNANI ST.

City  
HONOLULUState  
HIZip Code  
96818-1626FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643116**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENDORF, BRUCE, , ,**

Mailing Address 312 EAST BROADWAY

City  
LEOTIState  
KSZip Code  
67861-5016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INNKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643966**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 546 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENGLEBY, THOMAS, , MR.,**

Mailing Address 1110 S PEAK VIEW DR

City  
CASTLE ROCKState  
COZip Code  
80109-9525FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1142.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644522**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EREMITY, FRANK, , ,**

Mailing Address 12 DARTMOUTH CT

City  
STREAMWOODState  
ILZip Code  
60107-2179FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643557**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EVANS, JULIE, A., MS.,**

Mailing Address 420 DESERT AIRE DR. SW

City  
MATTAWAState  
WAZip Code  
99349-1961FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WGEOccupation (for Individual)  
APPLE FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643733**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 547 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EVANS, RAYMOND, E., MR.,**

Mailing Address 98 MOZART COURT

City  
EASTPORTState  
NYZip Code  
11941-1600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644172**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644062**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644063**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 548 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644065

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644068

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644069

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

59.60



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 549 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644070**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644075**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

605.12

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644651**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 550 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644652**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FASSNACHT, MARILYN, , ,**

Mailing Address 119 COFFEE MILL CREEK ROAD

City  
GEORGETOWNState  
TXZip Code  
78633-6015FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643866**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FEE, REGINA, , ,**

Mailing Address 11 UNO LAGO DR

City  
JUNO BEACHState  
FLZip Code  
33408-2661FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643278**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 551 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643903**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643907**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643911**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

605.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 552 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643963

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643964

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643968

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 553 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643972**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643975**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644007**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 554 OF 6441  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644010**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FERREE, CAROLYN, R., MS.,**

Mailing Address 5147 BRANDILES LN.

City  
WINSTON SALEMState  
NCZip Code  
27104-5057FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643026**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FIELDS, PATRICIA, , MS.,**Mailing Address 3455 CAMINITO SIERRA  
UNIT 302City  
CARLSBADState  
CAZip Code  
92009-8668FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

551.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644013**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 555 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FINN, PATRICK, , MR., JR.**Mailing Address 15705 LARIMORE PLZ  
APT 2City  
OMAHAState  
NEZip Code  
68116-8801FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642796**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISHER, GARY, , ,**

Mailing Address 119 PASEO ARAGON

City

SANTA FE

State

NM

Zip Code

87506-2148

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643229**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City

FLAGSTAFF

State

AZ

Zip Code

86005-8967

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

709.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642717**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 556 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFFState  
AZZip Code  
86005-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.05

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27642718**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLEMING, ROBERT, , ,**

Mailing Address 204 PAINSWUICKLN

City  
DOWNTOWNState  
PAZip Code  
19335-1705FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.06

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27642999**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLOWERS, MARY, , ,**

Mailing Address P.O. BOX 1231

City  
CODYState  
WYZip Code  
82414-1231FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

219.00

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644088**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 557 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORD, BEVERLY, , ,**

Mailing Address 4350 COVE ISLAND DRIVE NORTHEAST

City  
MARIETTAState  
GAZip Code  
30067-3614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644611**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643257**

Amount of Each Receipt this Period

2.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRIBERG, THOMAS, , ,**

Mailing Address 122 SAINT CHARLES CT

City  
PITTSBURGHState  
PAZip Code  
15238-2718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643894**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

206.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 558 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRIBERG, THOMAS, , ,**

Mailing Address 122 SAINT CHARLES CT

City  
PITTSBURGHState  
PAZip Code  
15238-2718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643914

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FULFER, KIM, , ,**

Mailing Address P.O. BOX 548

City  
JALState  
NMZip Code  
88252-0548FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642931

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FULLER, JOHN, D., MR.,**

Mailing Address 279 TOURNAMENT LN.

City  
FREEPORTState  
FLZip Code  
32439-6241FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

920.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643151

Amount of Each Receipt this Period

52.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

252.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 559 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLAGHER, JERRY, , ,**

Mailing Address 3979COUNTY RD 826

City  
ANNAState  
TXZip Code  
75409-3016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643496

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643335

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GHANI, AZHAR, , ,**

Mailing Address 738 N GREENWOOD AVE

City  
PARK RIDGEState  
ILZip Code  
60068-2508FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ILLINOIS GASTROENTEROLOGY GROUPOccupation (for Individual)  
NETWORK ENGINEERING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644427

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

186.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 560 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIORDANO, MICHAEL, , ,**

Mailing Address 59 YOWAGO AVE

City  
BRANFORDState  
CTZip Code  
06405-5526FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIORDANOOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3029.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643432**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIRVIN, JOANN, , MRS.,**

Mailing Address 7110 CREEKSIDE DR.

City  
LANSINGState  
MIZip Code  
48917-9618FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643045**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLENFIELD, STEPHEN, , ,**

Mailing Address PO BOX 596

City  
LONDONDERRYState  
NHZip Code  
03053-0596FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643693**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 561 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GODWIN, WESLEY, , ,**

Mailing Address 1269 E LAFAYETTE COURT

City  
SPRINGFIELDState  
MOZip Code  
65804-7494FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GODWIN AND ASSOCIATESOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.45

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643583**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOLDEN, JUDEE, , ,**

Mailing Address 11007 OLEANDER DRIVE

City  
CLERMONTState  
FLZip Code  
34711-8413FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.91

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643608**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOOD, BRENDA, , ,**

Mailing Address 1213 WARWICK DR.

City  
MIAMISBURGState  
OHZip Code  
45342-3250FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

399.55

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27642785**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 562 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643408**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRANDSINGER, PEGGY, , ,**

Mailing Address 5501 WEST HILDEBRAND BLVD #208

City  
KENNEWICKState  
WAZip Code  
99338-1975FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642909**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAUPENSPERGER, FRANCES ANN, , ,**

Mailing Address 1775 POWDER MILL RD RM 101

City  
YORKState  
PAZip Code  
17403-4955FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644472**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 563 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAUPENSPERGER, FRANCES ANN, , ,**

Mailing Address 1775 POWDER MILL RD RM 101

City  
YORKState  
PAZip Code  
17403-4955FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644477**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City

SAN CARLOS

State

CA

Zip Code

94070-2416

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643759**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City

SAN CARLOS

State

CA

Zip Code

94070-2416

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643761**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

177.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 564 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643766

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643774

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643778

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

152.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 565 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643780**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643783**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, MARJORIE, , ,**

Mailing Address 4312 BAYOU RIDGE DRIVE

City  
PACEState  
FLZip Code  
32571-8647FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642778**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.42

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 566 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, MARJORIE, , ,**

Mailing Address 4312 BAYOU RIDGE DRIVE

City  
PACEState  
FLZip Code  
32571-8647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642783

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, MARJORIE, , ,**

Mailing Address 4312 BAYOU RIDGE DRIVE

City  
PACEState  
FLZip Code  
32571-8647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642786

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598-2323FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

644.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643947

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 567 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIFFIN, RICHARD, C., MR.,**

Mailing Address 3457 CHIPMAN RD

City  
EASTONState  
PAZip Code  
18045-3024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BANGOR AREA SCHOOL DISTOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644681**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643675**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643676**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 568 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643678

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643681

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643684

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 569 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRISSOM, LINDA, , ,**

Mailing Address 1598 LEISURE WORLD

City  
MESAState  
AZZip Code  
85206-2315FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AWRCOccupation (for Individual)  
NURSE PRACTITIONER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644159**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMAKER, CHARLES, , ,**

Mailing Address 1518 CHESTNUT GROVE LANE

City  
KINGWOODState  
TXZip Code  
77345-1915FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643142**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HANSEN, TERESA, , ,**

Mailing Address 2917 , KANDAHAR DR

City  
SAINT CHARLESState  
MOZip Code  
63303-3166FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643490**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 570 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANSEN, TERESA, , ,**

Mailing Address 2917 , KANDAHAR DR

City  
SAINT CHARLESState  
MOZip Code  
63303-3166FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644532

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSEN, TERESA, , ,**

Mailing Address 2917 , KANDAHAR DR

City  
SAINT CHARLESState  
MOZip Code  
63303-3166FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644581

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARDY, RICHARD, B., MR.,**

Mailing Address 88 MASONIC HOME RD APT R313

City  
CHARLTONState  
MAZip Code  
01507-3304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

678.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644131

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 571 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARDY, RICHARD, B., MR.,**

Mailing Address 88 MASONIC HOME RD APT R313

City  
CHARLTONState  
MAZip Code  
01507-3304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644499

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRIS, DIANE, , ,**

Mailing Address 5021 WEST 4075 SOUTH

City  
WEST HAVENState  
UTZip Code  
84401-9386FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644025

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRIS, ROD, , ,**

Mailing Address 15515 SE RIVERSHORE DR.

City  
VANCOUVERState  
WAZip Code  
98683-5380FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

669.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642722

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 572 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRISON, TOM, , ,**

Mailing Address 6662 GILBERT PLACE

City  
SHREVEPORTState  
LAZip Code  
71106-3425FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BROADMOOROccupation (for Individual)  
MINISTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643466

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAY, KATHY, , ,**

Mailing Address 3 QUAIL VALLEY ROAD

City  
SHERWOODState  
ARZip Code  
72120-9625FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644299

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAYS, CHARLES, RAYMOND, MR.,**

Mailing Address 3100 BROOKHILL DR.

City  
BIRMINGHAMState  
ALZip Code  
35242-3702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643728

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

582.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 573 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643146

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643150

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEGWER, ELLEN, R., MS.,**

Mailing Address 76504 VIA CHIANTI

City  
INDIAN WELLSState  
CAZip Code  
92210-7808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

607.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643261

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 574 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEINRICH, SARAH, J., MRS.,**

Mailing Address 6004 AMBER OAKS AVE

City  
BAKERSFIELDState  
CAZip Code  
93306-7008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642759

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEISLER, KATHY, P., ,**

Mailing Address 1177 CLARENCE BARHAM RD

City  
BETHEL SPRINGSState  
TNZip Code  
38315-4527FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643794

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HELFEN, WILLIAM, , ,**

Mailing Address 5437 HARGROVE BOULEVARD

City  
VIRGINIA BEACHState  
VAZip Code  
23464-2333FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

276.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642748

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

87.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 575 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENDERSON, RAYMOND, , ,**

Mailing Address 6200 ATTALA ROAD 1106

City  
KOSCIUSKOState  
MSZip Code  
39090-6217FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1058.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644372**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENRY, JAMES, R., MR.,**

Mailing Address 2608 COLLEGE DRIVE

City  
VICTORIAState  
TXZip Code  
77901-4482FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE AND SECURITIES SALE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643708**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENTHORN, JIM, , ,**

Mailing Address 242 COUNTY HIGHWAY 183 NORTH

City  
DEFUNIAK SPRINGSState  
FLZip Code  
32433-4394FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643824**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 576 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERRELL, TOMMIE, C., MR.,**

Mailing Address P.O. BOX 4338

City  
ALAMOGORDOState  
NMZip Code  
88311-4338FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643932

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, ROSALIE, , ,**

Mailing Address 8824 33RD ST E

City  
EDGEWOODState  
WAZip Code  
98371-2803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644264

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIPPI, CHARLES, R., ,**

Mailing Address 4226 ROBERTS RD

City  
KERSHAWState  
SCZip Code  
29067-8761FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644628

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 577 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLLINGTON, MARGARET, , ,**

Mailing Address 9960 ATRIUM WAY APT 514

City  
JACKSONVILLEState  
FLZip Code  
32225-6447FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643696**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLOWAY, RICHARD, , ,**

Mailing Address 5036A CURTIS ROTH LANE

City  
PLEASANT PLAINSState  
ILZip Code  
62677-4119FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642914**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLMES, SANDRA, , ,**

Mailing Address P.O. BOX 6905

City  
LAGUNA NIGUELState  
CAZip Code  
92607-6905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

577.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643060**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 578 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLMES, SANDRA, , ,**

Mailing Address P.O. BOX 6905

City  
LAGUNA NIGUELState  
CAZip Code  
92607-6905FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643063

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLMES, SANDRA, , ,**

Mailing Address P.O. BOX 6905

City  
LAGUNA NIGUELState  
CAZip Code  
92607-6905FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643066

Amount of Each Receipt this Period

0.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644336

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

38.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 579 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644341**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644344**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644347**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 580 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** HRUZA, VIRGINIA, , ,

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644349

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** HRUZA, VIRGINIA, , ,

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644353

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** HRUZA, VIRGINIA, , ,

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644357

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 581 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644381

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBBARD, BARBARA, A., MS.,**

Mailing Address P.O. BOX 1736

City  
LAS CRUCESState  
NMZip Code  
88004-1736FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643398

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ICARDO, YVONNE, MARIE, MS.,**

Mailing Address 2807 PANORAMA DRIVE

City  
BAKERSFIELDState  
CAZip Code  
93306-1017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642887

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 582 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642821

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642838

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643357

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 583 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ILICH, THOMAS, , ,**

Mailing Address 24395 MCDONALD ST.

City  
DEARBORN HEIGHTSState  
MIZip Code  
48125-1923FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643386

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ILIFFE, STUART, , ,**

Mailing Address 940 SAINT JAMES LANE

City  
VERO BEACHState  
FLZip Code  
32967-7334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644387

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ILIFFE, STUART, , ,**

Mailing Address 940 SAINT JAMES LANE

City  
VERO BEACHState  
FLZip Code  
32967-7334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644393

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

149.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 584 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ILIFFE, STUART, , ,**

Mailing Address 940 SAINT JAMES LANE

City  
VERO BEACHState  
FLZip Code  
32967-7334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644395

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ILIFFE, STUART, , ,**

Mailing Address 940 SAINT JAMES LANE

City  
VERO BEACHState  
FLZip Code  
32967-7334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644397

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IREDALE, NANCY, L., MS.,**

Mailing Address P.O. BOX 5084

City  
INCLINE VILLAGEState  
NVZip Code  
89450-5084FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

357.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642735

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 585 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IRICK, RICHARD, , ,**

Mailing Address 147 BARBER FARM RD

City  
JERICHOState  
VTZip Code  
05465-3113FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AWIOccupation (for Individual)  
EDUCATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642869

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642835

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644045

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 586 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644629

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644630

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAUDES, MARY, K., MRS.,**

Mailing Address 12657 BRADFORD WOODS DR.

City  
SAINT LOUISState  
MOZip Code  
63127-1360FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644576

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 587 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, COLLEEN, , ,**

Mailing Address 541 RIVERVIEW DR. NW

City  
SALEMState  
ORZip Code  
97304-4338FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAPITAL MANOROccupation (for Individual)  
CAREGIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643196

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, KAY, , ,**

Mailing Address 800 NAVAJO AVE

City  
FORT MORGANState  
COZip Code  
80701-4081FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644426

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGSState  
IDZip Code  
83276-1671FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

508.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643412

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 588 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSTON, SANDRA, , ,**

Mailing Address 32 NEW VILLAGE LN

City  
SMYRNAState  
DEZip Code  
19977-4715FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644598

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643148

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644708

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.03



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 589 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644709

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644715

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644443

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

71.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 590 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644240

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644356

Amount of Each Receipt this Period

34.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643009

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

122.79

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 591 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEEN, JACK, W., MR.,**

Mailing Address 7016 DA VINCI

City  
COLLEYVILLEState  
TXZip Code  
76034-8262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WNM COMMUNICATIONSOccupation (for Individual)  
CHAIRMAN OF THE BOARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1433.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643995**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEENAN, MARK, , ,**

Mailing Address 16719 SMOKY MOUNTAIN AVENUE

City  
CALDWELLState  
IDZip Code  
83607-1451FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VALLRYRIDEOccupation (for Individual)  
BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643280**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KELLY, ERNEST, G., MR., JR.**

Mailing Address 219 ANGELUS

City  
MEMPHISState  
TNZip Code  
38112-5201FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

965.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643483**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

239.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 592 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KELLY, ERNEST, G., MR., JR.**

Mailing Address 219 ANGELUS

City  
MEMPHISState  
TNZip Code  
38112-5201FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

965.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643846**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KINCADE, ROBERT, A., MR.,**

Mailing Address 2550 UNIVERSITY AVE W

City  
SAINT PAULState  
MNZip Code  
55114-1052FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STONEBRIDGE CAPITAL ADVISORSOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644185**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, TANYA, LUNN, MRS.,**

Mailing Address 1048 ELLERBE CT.

City  
SHREVEPORTState  
LAZip Code  
71106-7757FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643254**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 593 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KING, TANYA, LUNN, MRS.,**

Mailing Address 1048 ELLERBE CT.

City  
SHREVEPORTState  
LAZip Code  
71106-7757FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643316**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KINNETT, FOREST, , MR.,**

Mailing Address 1012 GLEN DAY DRIVE

City  
CLEMMONSState  
NCZip Code  
27012-9560FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643928**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643087**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 594 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOOP, RICHARD, L., ,**

Mailing Address 50PAIGE LN

City  
MORICHESState  
NYZip Code  
11955-1820FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27642807**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KULBERSH, RICHARD, , MR.,**

Mailing Address 2725 RIDGEWOOD CT

City  
BLOOMFIELD HILLSState  
MIZip Code  
48302-0967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.66

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644283**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUNSTMANN, MARTIN, P., ,**

Mailing Address 10 PEETIES PATH

City  
DAMASCUSState  
PAZip Code  
18415-3636FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

383.95

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643439**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

191.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 595 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KURTI, S., CAROL, ,**

Mailing Address 934 COWEE SCHOOL RD.

City  
FRANKLINState  
NCZip Code  
28734-4524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644376

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LACKEY, ANN, , ,**

Mailing Address 1117 SPRUCE STREET

City  
LAKE OSWEGOState  
ORZip Code  
97034-6153FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643789

Amount of Each Receipt this Period

2.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAIRD, GORDON, , ,**

Mailing Address 39451 E 41RD

City  
MORRISONState  
OKZip Code  
73061-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PAWNEE HEALTH AND WELLNESSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

293.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644285

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 596 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LALONDE, RICHARD , , ,**

Mailing Address 3332 NW 47TH CT

City  
OCALAState  
FLZip Code  
34482-8322FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

938.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643788

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAMB, LELAND, , ,**

Mailing Address 1250 COUNTRY CLUB DR.

City  
CAMANO ISLANDState  
WAZip Code  
98282-7602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643634

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAMPING, DOUG, R., MR.,**

Mailing Address 1433 SOUTH 35 EAST

City  
FARMINGTONState  
UTZip Code  
84025-2004FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UDCOccupation (for Individual)  
CO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

494.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643779

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

333.13



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 597 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LARSON, LARRY, , ,**

Mailing Address 916 22ND AVENUE

City  
LONGVIEWState  
WAZip Code  
98632-2246FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BHI ENERGYOccupation (for Individual)  
RADIATION TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643701**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LARSON, RICHARD, , ,**

Mailing Address 9 WARREN STREET

City  
LEXINGTONState  
MAZip Code  
02421-5624FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RICHARD LARSONOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.21

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644015**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LARUE, PATRICIA, , ,**

Mailing Address 3137-B GOLDEN YEARS HOMESTEAD DR

City  
NEW HAVENState  
INZip Code  
46774-3003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.59

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27642839**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 598 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, RUBY, , ,**

Mailing Address 92430 LEIOLE ST

City  
KAPOLEIState  
HIZip Code  
96707-1008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644091

Amount of Each Receipt this Period

38.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEIN, DONALD, H., MR.,**

Mailing Address 223 SAVAGE FARM DR.

City  
ITHACAState  
NYZip Code  
14850-6501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNELL UNIVOccupation (for Individual)  
PROFESSOR EMERITUS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644214

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEVENGOOD, RICHARD, , ,**

Mailing Address 1414 RIDGE RD

City  
LANCASTERState  
PAZip Code  
17603-4736FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ARCHITECTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644384

Amount of Each Receipt this Period

160.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

298.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 599 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LITTEL, JOSEPH, , MR.,**

Mailing Address 5830 TIMBER LAND CIRCLE

City  
FITCHBURGState  
WIZip Code  
53711-5173FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642987

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIU, ARTHUR, , ,**

Mailing Address P.O. BOX 16669

City  
ENCINOState  
CAZip Code  
91416-6669FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642918

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOMBARDO, MARIE, , ,**

Mailing Address 1 HAWTHORNE LANE

City  
NORWELLState  
MAZip Code  
02061-1253FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

356.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644077

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

204.38

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 600 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOOMIS, JOSEPH, , ,**

Mailing Address 2711 LOWER PODUNK ROAD

City  
NEW MILFORDState  
PAZip Code  
18834-7417FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643567

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LORENZ, ALONAH, , MS.,**

Mailing Address 160 40TH AVE SE

City  
BENSONState  
MNZip Code  
56215-1358FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643331

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOVE, REBECCA, ANN, ,**

Mailing Address 2006 MAGNOLIA BEND

City  
BAYTOWNState  
TXZip Code  
77523-9195FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

618.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643100

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

178.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 601 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOVE, REBECCA, ANN, ,**

Mailing Address 2006 MAGNOLIA BEND

City  
BAYTOWNState  
TXZip Code  
77523-9195FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643109**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LYSTIG, CAROLYN, , ,**

Mailing Address 2155 6TH LANE SE, APT 206

City  
CAMBRIDGEState  
MNZip Code  
55008-2528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643552**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MA, HOMER, , ,**

Mailing Address 1819 HAPP RD

City  
NORTHBROOKState  
ILZip Code  
60062-5640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644252**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 602 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MA, HOMER, , ,

Mailing Address 1819 HAPP RD

City  
NORTHBROOKState  
ILZip Code  
60062-5640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644258

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MA, HOMER, , ,

Mailing Address 1819 HAPP RD

City  
NORTHBROOKState  
ILZip Code  
60062-5640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644260

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MA, HOMER, , ,

Mailing Address 1819 HAPP RD

City  
NORTHBROOKState  
ILZip Code  
60062-5640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644263

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 603 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MA, HOMER, , ,**

Mailing Address 1819 HAPP RD

City  
NORTHBROOKState  
ILZip Code  
60062-5640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644277**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACARIO, KELLI, , ,**

Mailing Address 27136 SOUTH INDIAN ROAD

City  
PARK HILLState  
OKZip Code  
74451-3022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644318**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACKAIG, RICHARD, A., MR.,**Mailing Address 25422 SEA BLUFFS DR  
UNIT 208City  
DANA POINTState  
CAZip Code  
92629-2194FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643233**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

193.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 604 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACUMBER, THOMAS, , ,**

Mailing Address 443 SLATE STREET

City  
CHESAPEAKEState  
VAZip Code  
23322-1705FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644542

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MADDOCKS, WILLIAM, , ,**

Mailing Address PO BOX 908

City  
SCHERERVILLEState  
INZip Code  
46375-0908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642820

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MADER, VIRGINIA, , ,**

Mailing Address 1805 SUNRIDGE AVENUE

City  
GILLETTEState  
WYZip Code  
82718-7665FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

264.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643691

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.21



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 605 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644392**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644403**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644406**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 606 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644407

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTINEZ, AMNERIS, , ,**

Mailing Address 4404 LAKEMONT CT

City  
WEST PALM BEACHState  
FLZip Code  
33403-1158FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PGA NATIONAL RESORTOccupation (for Individual)  
HOUSEKEEPING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644445

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

464.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643155

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 607 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644438**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCBEE, RICHARD, , ,**

Mailing Address 272 VALLEY VIEW LANE

City  
INDIAN SPRINGSState  
ALZip Code  
35124-3635FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MOVEDADDYOccupation (for Individual)  
TRUCKING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643277**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCELREATH, JAMES, , ,**

Mailing Address 1701SHADYDIDE

City  
EAST LIVERPOOLState  
OHZip Code  
43920-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

393.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642947**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

524.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 608 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCNEILLWEINER, DANA, , ,**

Mailing Address 132 EMERALD BAY

City  
LAGUNA BEACHState  
CAZip Code  
92651-1209FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643630

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCROY, GAYLE, , ,**

Mailing Address 1458 DAHLIA RD

City  
COLUMBIAState  
SCZip Code  
29205-4812FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643697

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEIER, CURT, E., MR.,**

Mailing Address 4721 RD 18

City  
LAGRANGEState  
WYZip Code  
82221-8410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE OF WYOOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642745

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

224.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 609 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEIER, CURT, E., MR.,**

Mailing Address 4721 RD 18

City  
LAGRANGEState  
WYZip Code  
82221-8410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE OF WYOOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644553

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEREDITH, PAUL, , ,**

Mailing Address 266 BULLFINCH ROAD

City  
MOORESVILLEState  
NCZip Code  
28117-5407FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643094

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEREDITH, PAUL, , ,**

Mailing Address 266 BULLFINCH ROAD

City  
MOORESVILLEState  
NCZip Code  
28117-5407FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643131

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

257.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 610 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIDDLETON, JAYNE, , ,**

Mailing Address 2420CREEKWOOD DR

City  
BATON ROUGEState  
LAZip Code  
70808-0115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644363

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644399

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOLENDORP, DAYTON, , MR.,**

Mailing Address 6507 CASTLE KNOLL COURT

City  
INDIANAPOLISState  
INZip Code  
46250-1439FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643800

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

139.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 611 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONKE, SHEILA, , MS.,**

Mailing Address 12230 COUNTY ROAD P1

City  
NICKERSONState  
NEZip Code  
68044-2595FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AGRICULTURE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644334**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643962**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644486**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 612 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOODY, JO, ANN, ,**

Mailing Address 507 POWER DR.

City  
DUNCANVILLEState  
TXZip Code  
75116-3721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.14

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644466

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORRIS, MIKE , , ,**

Mailing Address 578 SNAPDRAGON WAY

City  
IMPERIALState  
CAZip Code  
92251-8947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

842.08

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644272

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRIS, SHAWN, A., MR.,**Mailing Address 230 FRONT ST  
PO BOX 1295City  
MONUMENTState  
COZip Code  
80132-9136FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LA CASA FIESTA RESTAURANTOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

219.73

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644193

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

79.45



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 613 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORRIS, SHAWN, A., MR.,**Mailing Address 230 FRONT ST  
PO BOX 1295City  
MONUMENTState  
COZip Code  
80132-9136FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LA CASA FIESTA RESTAURANTOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644291**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOTT, BOB, , ,**

Mailing Address 5608 W BARTLETT AVE

City

LAS VEGAS

State

NV

Zip Code

89108-3216

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643578**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOURAD, ANTHONY, , ,**Mailing Address 1355 S PORTOFINO DR.  
APT 101

City

SARASOTA

State

FL

Zip Code

34242-3140

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

410.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644565**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 614 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUNSEY, MELODYE, , ,**

Mailing Address 3535 SO OCEAN DR.

City  
HOLLYWOODState  
FLZip Code  
33019-2898FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FAMILY CHRISTIAN WORLD INC .Occupation (for Individual)  
SR. PASTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642723**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643179**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NAMORATO, MICHAEL, , ,**

Mailing Address 129 LAKEWAY DR.

City  
OXFORDState  
MSZip Code  
38655-9600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644446**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 615 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, FRED, E., MR.,**Mailing Address 900 TAMIAMI TRL S  
APT 534City  
VENICEState  
FLZip Code  
34285-3627FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644578**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, J., SCOTT, ,**

Mailing Address 5540 WEST EL PASO AVENUE

City  
FRESNOState  
CAZip Code  
93722-2788FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643366**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, PATRICIA, , ,**

Mailing Address 138 SOUTH SALEM DR.

City  
MCDONOUGHState  
GAZip Code  
30253-4768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

569.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643123**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 616 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.60

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644328**

Amount of Each Receipt this Period

41.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.60

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644332**

Amount of Each Receipt this Period

41.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

856.60

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644342**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

41.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 617 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644348

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644351

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

856.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644354

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

83.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 618 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.60

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644359**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.60

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644366**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEMEROFF, EILEEN, , ,**

Mailing Address 20 POND CROSSING

City  
SOUTHAMPTONState  
NYZip Code  
11968-4728FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1332.43

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644168**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 619 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEMEROFF, EILEEN, , ,**

Mailing Address 20 POND CROSSING

City  
SOUTHAMPTONState  
NYZip Code  
11968-4728FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1332.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644177

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEWELL, LINDA, , ,**

Mailing Address 4324 SUMMER STAR LANE

City  
FORT WORTHState  
TXZip Code  
76244-4934FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643107

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NGUYEN, MAITHI, , ,**

Mailing Address 1504 W 7TH ST

City  
SANTA ANAState  
CAZip Code  
92703-2913FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643393

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

169.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 620 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NGUYEN, TOAN, , ,**

Mailing Address 472 ILCREST DR.

City  
HOUSTONState  
TXZip Code  
77042-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644306

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NICHOLS, PHIL, , ,**

Mailing Address 407 WEST CORNELL STREET

City  
AVON PARKState  
FLZip Code  
33825-3700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1266.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643494

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NICHOLS, PHIL, , ,**

Mailing Address 407 WEST CORNELL STREET

City  
AVON PARKState  
FLZip Code  
33825-3700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1266.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643803

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

251.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 621 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NIEMANN, NANCY, , ,**

Mailing Address 18 DOGWOOD RD.

City  
MORRIS PLAINSState  
NJZip Code  
07950-1919FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

853.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643406**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOGARA, CLEOPATRA, , ,**

Mailing Address 855 DONALD ST

City  
SONOMAState  
CAZip Code  
95476-4608FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644074**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NORSWORTHY, GEORGE, , ,**

Mailing Address 6600 N LOWER CASCADE DR.

City  
JACKSONState  
WYZip Code  
83001-9026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GEORGE NORSWORTHYOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

617.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643464**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

292.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 622 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O' BRIEN, CYNTHIA, , ,**

Mailing Address 15830 KNOLL LAKE DR.

City  
HOUSTONState  
TXZip Code  
77095-2640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644100

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O' BRIEN, CYNTHIA, , ,**

Mailing Address 15830 KNOLL LAKE DR.

City  
HOUSTONState  
TXZip Code  
77095-2640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644102

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O' BRIEN, CYNTHIA, , ,**

Mailing Address 15830 KNOLL LAKE DR.

City  
HOUSTONState  
TXZip Code  
77095-2640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

540.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644105

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 623 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OFSTIE, NANCY, , ,**

Mailing Address 919 ORCHID POINT WAY

City  
VERO BEACHState  
FLZip Code  
32963-9518FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643309

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, PATRICIA, , ,**

Mailing Address 243 OCEANO DRIVE

City  
LOS ANGELESState  
CAZip Code  
90049-4123FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643647

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLSON, PHILIP, , ,**

Mailing Address 2205 ENGLEWOOD AVE

City  
YAKIMAState  
WAZip Code  
98902-1647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

378.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643967

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 624 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ORR, CLAUDIA, , ,**

Mailing Address 9 JAGGER AVE

City  
NEPTUNEState  
NJZip Code  
07753-3454FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644173**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSBURN, ROBERT, , ,**

Mailing Address 12735 SHADOW CREEK PARKWAY

City  
PEARLANDState  
TXZip Code  
77584-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642866**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSBURN, ROBERT, , ,**

Mailing Address 12735 SHADOW CREEK PARKWAY

City  
PEARLANDState  
TXZip Code  
77584-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

625.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643595**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.18

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 625 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27642921**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27642922**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27642924**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

9.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 626 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27642925**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27642926**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27642927**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48.53

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 627 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27643037**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27643079**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27643086**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 628 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAGE, SUSAN, , ,**Mailing Address 2414 FRONT ST  
#22City  
SAN DIEGOState  
CAZip Code  
92101-1439FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643040

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARSONS, DENISE, , ,**

Mailing Address 1324 COUNTY ROAD 225

City  
BLUFFTONState  
TXZip Code  
78607-3008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644101

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARSONS, DENISE, , ,**

Mailing Address 1324 COUNTY ROAD 225

City  
BLUFFTONState  
TXZip Code  
78607-3008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644125

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 629 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, JOHN, B., MR.,**

Mailing Address 9900 NE 114 TH CIRCLE

City  
VANCOUVERState  
WAZip Code  
98662-1588FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VSNA, LLCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642971

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PILKINGTON, CURT, , MR.,**

Mailing Address 226 S SECOND ST.

City  
STERLINGState  
COZip Code  
80751-4217FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CURT PILKINGTONOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1024.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642934

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PISTORINO, MARIA, , MS.,**

Mailing Address 6535 SW 123RD STREET

City  
PINECRESTState  
FLZip Code  
33156-5554FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

983.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644250

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

233.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 630 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PLANK, HEATHER, , ,**

Mailing Address PO BOX 5082

City  
SHERIDAN

State  
WY

Zip Code  
82801-1382

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

903.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

**Transaction ID : SA11A.27644378**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PLENDERLEITH, GRACE, , ,**

Mailing Address 111 FALCON RIDGE DRIVE

City  
IRWIN

State  
PA

Zip Code  
15642-3094

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

**Transaction ID : SA11A.27644337**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PLENDERLEITH, GRACE, , ,**

Mailing Address 111 FALCON RIDGE DRIVE

City  
IRWIN

State  
PA

Zip Code  
15642-3094

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

**Transaction ID : SA11A.27644364**

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

255.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 631 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PLENDERLEITH, GRACE, , ,**

Mailing Address 111 FALCON RIDGE DRIVE

City  
IRWINState  
PAZip Code  
15642-3094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644367**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PLENDERLEITH, GRACE, , ,**

Mailing Address 111 FALCON RIDGE DRIVE

City  
IRWINState  
PAZip Code  
15642-3094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644370**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POHOST, GERALD, , DR.,**

Mailing Address 4366 W 8TH ST

City  
LOS ANGELESState  
CAZip Code  
90005-3788FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

557.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642858**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 632 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POHOST, GERALD, , DR.,**

Mailing Address 4366 W 8TH ST

City  
LOS ANGELESState  
CAZip Code  
90005-3788FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642861

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POHOST, GERALD, , DR.,**

Mailing Address 4366 W 8TH ST

City  
LOS ANGELESState  
CAZip Code  
90005-3788FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642872

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POHOST, GERALD, , DR.,**

Mailing Address 4366 W 8TH ST

City  
LOS ANGELESState  
CAZip Code  
90005-3788FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

557.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643000

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

123.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 633 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POHOST, GERALD, , DR.,**

Mailing Address 4366 W 8TH ST

City  
LOS ANGELESState  
CAZip Code  
90005-3788FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643001**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POHOST, GERALD, , DR.,**

Mailing Address 4366 W 8TH ST

City  
LOS ANGELESState  
CAZip Code  
90005-3788FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643002**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POHOST, GERALD, , DR.,**

Mailing Address 4366 W 8TH ST

City  
LOS ANGELESState  
CAZip Code  
90005-3788FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

557.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643003**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 634 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POHOST, GERALD, , DR.,**

Mailing Address 4366 W 8TH ST

City  
LOS ANGELESState  
CAZip Code  
90005-3788FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643005**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POHOST, GERALD, , DR.,**

Mailing Address 4366 W 8TH ST

City  
LOS ANGELESState  
CAZip Code  
90005-3788FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643007**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POWELL, SCOTT, , MR.,**

Mailing Address PO BOX 3234

City  
PONTE VEDRA BEACHState  
FLZip Code  
32004-3234FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

518.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644231**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 635 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POWELL, SCOTT, , MR.,**

Mailing Address PO BOX 3234

City  
PONTE VEDRA BEACHState  
FLZip Code  
32004-3234FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

518.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644245

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRESTON, BRADLEY, B., MR.,**

Mailing Address 2109 SOMMER ST

City  
NAPAState  
CAZip Code  
94559-4306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644620

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRINE, DANNY, , ,**

Mailing Address 10240 GRIFFITH AVE

City  
DELHIState  
CAZip Code  
95315-9634FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643390

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 636 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. QUINN, RICHARD, , MR.,**

Mailing Address 6012 MAURYS TRL

City  
AUSTINState  
TXZip Code  
78730-2868FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644230

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RADY, PAUL, M., MR.,**

Mailing Address 4 MOCKINGBIRD LN

City  
ENGLEWOODState  
COZip Code  
80113-4813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANTERO RESOURCESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8901.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643528

Amount of Each Receipt this Period

950.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RECORD, STEVE, , ,**Mailing Address 607 HIGHWAY 340  
#19City  
FRUITAState  
COZip Code  
81521-9520FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEVE RECORDOccupation (for Individual)  
OIL GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643173

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1304.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 637 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REESE, THOMAS, , ,**

Mailing Address 23976 STAGECOACH ROAD

City  
GENESEOState  
ILZip Code  
61254-8361FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644098

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REEVES, JOHN, , ,**

Mailing Address 94-597 KAIEWA ST

City  
WAIPAHUState  
HIZip Code  
96797-1248FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US NAVYOccupation (for Individual)  
LOGISTICS MANAGEMENT SPECIAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643048

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REINHARD, ROSEMARIE, , MR.,**

Mailing Address 2755 FALCON STREET

City  
EAST MEADOWState  
NYZip Code  
11554-4318FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

505.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643444

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

154.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 638 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RENNHACK, SHARON, , ,**

Mailing Address 1700 NW 74 AVENUE

City  
PLANTATIONState  
FLZip Code  
33313-4404FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643725**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REX, MURIEL, A., MRS.,**

Mailing Address 8197 VERDURA ST

City  
NAVARREState  
FLZip Code  
32566-9262FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643876**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REYES, JOSE, , ,**

Mailing Address 929 WEST MOUNTAIN STREET

City  
GLENDALEState  
CAZip Code  
91202-1045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642731**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

639.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 639 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REYNOLDS, GLENN, R., MR.,**

Mailing Address 5 BOLINGBROKE DRIVE

City  
TOMS RIVERState  
NJZip Code  
08757-4330FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644498**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RHODES, MICHELLE, , ,**

Mailing Address 590 MOOR WAY

City  
SAINT ALBANSState  
MOZip Code  
63073-1221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643164**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICCIUTI, LOU RAE, , ,**

Mailing Address 12107 KAMMERER AVENUE

City  
CONNEAUT LAKEState  
PAZip Code  
16316-3941FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644462**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

209.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 640 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICHARDSON, CONRAD, , ,**

Mailing Address 234 CAHABA OAKS TRL

City  
INDIAN SPRINGSState  
ALZip Code  
35124-3333FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644192**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RITCHEY, GREG, , ,**

Mailing Address 5333 53 STREET N

City  
SAINT PETERSBURGState  
FLZip Code  
33709-3735FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
USPSOccupation (for Individual)  
LETTER CARRIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644664**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIVERA, ELIZABETH, H., ,**

Mailing Address 6615 BANDERA AVE APT 1D

City  
DALLASState  
TXZip Code  
75225-4027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SEWISH WEST SECURITYOccupation (for Individual)  
STOCKBROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643336**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

270.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 641 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBERTS, GARY, D., MR.,**

Mailing Address 6206 APPIAN WAY

City  
RIVERSIDE

State  
CA

Zip Code  
92506-4555

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

**02** / **02** / **2025**

**Transaction ID : SA11A.27644431**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODACK, MARK, , ,**

Mailing Address 16051 COLLINS AVE  
3502

City

NORTH MIAMI BEACH

State

FL

Zip Code

33160-4624

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

782.88

Date of Receipt

**02** / **02** / **2025**

**Transaction ID : SA11A.27644666**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODRIGUE, MERRY, , MS.,**

Mailing Address 307 WOODWAY DR

City

HOUMA

State

LA

Zip Code

70363-3846

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**02** / **02** / **2025**

**Transaction ID : SA11A.27643029**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

190.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 642 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROSCITT, RICK, , ,**

Mailing Address 36 ISLAND DRIVE

City  
BRICKState  
NJZip Code  
08724-4432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643338

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROSENTHAL, DON, E., MR.,**

Mailing Address PO BOX 414

City  
COULTERVILLEState  
ILZip Code  
62237-0414FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WOODLAND LUMBER CO.Occupation (for Individual)  
MANUFACTURING HARDWOOD LUM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644219

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642739

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

205.14

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 643 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORD

State  
NH

Zip Code  
03301-5847

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

**Transaction ID : SA11A.27643140**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORD

State  
NH

Zip Code  
03301-5847

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

**Transaction ID : SA11A.27643436**

Amount of Each Receipt this Period

0.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORD

State  
NH

Zip Code  
03301-5847

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

**Transaction ID : SA11A.27643603**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 644 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643954

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643986

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644083

Amount of Each Receipt this Period

1.74

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.82



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 645 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644278

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644294

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642746

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

76.33

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 646 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVER

State  
NJ

Zip Code  
08882-1908

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27644457**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINE

State  
CA

Zip Code  
92604-2216

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.83

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27644242**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SACHNOFF, BRUCE, , ,**

Mailing Address 126 FIELD CLUB ROAD

City  
PITTSBURGH

State  
PA

Zip Code  
15238-2238

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

694.61

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27644121**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

81.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 647 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SADAR, AMELIA, , MS.,**

Mailing Address 1604STONE MANSION DR.

City  
SEWICKLEYState  
PAZip Code  
15143-8601FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.91

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643211**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANCHEZ, JOSE, , ,**

Mailing Address 10606 WAYNE AVENUE

City  
LUBBOCKState  
TXZip Code  
79424-7417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
XFABOccupation (for Individual)  
MFG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.60

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643762**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCARLETT, KENNETH, , ,**

Mailing Address 17114 PARK LODGE DR.

City  
SPRINGState  
TXZip Code  
77379-4493FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.05

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644034**

Amount of Each Receipt this Period

46.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 648 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHATTYN, JOHN, , MR.,**

Mailing Address 129 CROCKETT DR.

City  
KERRVILLEState  
TXZip Code  
78028-8114FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643520

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHEURELL, JAMES, E., MR.,**

Mailing Address 904 FAIRVIEW AVE

City  
SOUTH MILWAUKEEState  
WIZip Code  
53172-1720FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644358

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHICK, MARIA, , ,**

Mailing Address 514 BRIAR KNOLL

City  
HOUSTONState  
TXZip Code  
77079-6307FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONOCOPHILLIPSOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643134

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

244.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 649 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHWENZER, JOHN, , MR.,**

Mailing Address 4465 LAKEVIEW GLEN DR.

City  
MEDINAState  
OHZip Code  
44256-6510FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642898

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHWEDA, THOMAS, , ,**

Mailing Address N67W34981

City  
OCONOMOWOCState  
WIZip Code  
53066-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONCEPT MACHINEOccupation (for Individual)  
MACHINE TOOL SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643786

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642801

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 650 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642803

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642806

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642808

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 651 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642809

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642813

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642814

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 652 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEITER, JOHN, H., MR.,**

Mailing Address 3293 PADARO LN

City  
CARPINTERIAState  
CAZip Code  
93013-1116FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1166.96

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643137**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEWARD, JESSIE, M., DR.,**

Mailing Address 2231 ROBINSON RD NE STE200

City  
MARIETTAState  
GAZip Code  
30068-2289FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644111**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHAFFER, JOHN, , ,**

Mailing Address 267 NEWPORT NEWS AVE

City  
HAMPTONState  
VAZip Code  
23669-4146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644518**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

211.79



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 653 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTIN

State  
TX

Zip Code  
78739-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27643617**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOOP, BEV, , ,**

Mailing Address 843 N. WOODLAWN AVE.

City  
KIRKWOOD

State  
MO

Zip Code  
63122-2949

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.57

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27644097**

Amount of Each Receipt this Period

2.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHOOP, BEV, , ,**

Mailing Address 843 N. WOODLAWN AVE.

City  
KIRKWOOD

State  
MO

Zip Code  
63122-2949

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.57

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27644706**

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

31.76

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 654 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOOP, BEV, , ,**

Mailing Address 843 N. WOODLAWN AVE.

City  
KIRKWOODState  
MOZip Code  
63122-2949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644707

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOOP, BEV, , ,**

Mailing Address 843 N. WOODLAWN AVE.

City  
KIRKWOODState  
MOZip Code  
63122-2949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644712

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHOOP, BEV, , ,**

Mailing Address 843 N. WOODLAWN AVE.

City  
KIRKWOODState  
MOZip Code  
63122-2949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644716

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 655 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, CAROL, , MS.,**

Mailing Address 6249 INDIAN PATH

City  
SAN ANGELOState  
TXZip Code  
76901-4915FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644362**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, ROBERT, , ,**Mailing Address 300 OCEAN RD.  
3ECity  
VERO BEACHState  
FLZip Code  
32963-3272FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644222**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643144**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 656 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNODGRASS, DIANNE, , ,**

Mailing Address 808 W. CRESSE AVE.

City  
WILDWOODState  
NJZip Code  
08260-1565FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644566

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SNYDER, CARLA, , ,**

Mailing Address 15725 S. INDEPENDENCE CT., APT. 2W

City  
OAK FORESTState  
ILZip Code  
60452-3249FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CCSSOccupation (for Individual)  
RESIDENTIAL MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644537

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOERTEL, GREGG, S., MR.,**

Mailing Address 116 SOUTHERN VALLEY CT

City  
MARSState  
PAZip Code  
16046-9306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PPM CONSULTINGOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642912

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

117.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 657 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642863

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643541

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644082

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

159.17

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 658 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPIX, BRIAN, K., MR.,**

Mailing Address 1910 RIDGEFIELD CT

City  
ROSWELLState  
GAZip Code  
30075-4115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LEVEL ONE CONSTRUCTION CO LLCOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643487**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STANLEY, ERLA , , ,**

Mailing Address 1979 E PIN HIGH DR

City  
FRESNOState  
CAZip Code  
93730-7079FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642744**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STAUDER, TIMOTHY, D., MR.,**

Mailing Address 8 MAJESTIC DR.

City  
DIX HILLSState  
NYZip Code  
11746-4859FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CJ QUALITY DISTRIBUTORSOccupation (for Individual)  
WHOLESALE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643690**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

181.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 659 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644562

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRATTON, TAUNA, , ,**

Mailing Address 21600 BELLA FLORES LN

City  
PALO CEDROState  
CAZip Code  
96073-8650FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
RANCHER/DESIGNED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643772

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STREBECK, JULIA, , ,**

Mailing Address 5315 CR 922

City  
NEVADAState  
TXZip Code  
75173-6161FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642741

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

111.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 660 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STURGILL, LARRY, , ,**

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27642727**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TALLEY, RICHARD, , ,**Mailing Address 2777 PARADISE RD  
3606City  
LAS VEGASState  
NVZip Code  
89109-9126FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644320**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TANNER, CHARLES, , ,**

Mailing Address 4 WOODVALE ROAD

City  
GLEN ROCKState  
NJZip Code  
07452-3612FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.36

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644350**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.13



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 661 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAQUEY, ANTONY, , MR.,**

Mailing Address P.O. BOX 26544

City  
WINSTON SALEM

State  
NC

Zip Code  
27114-6544

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.00

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27643172**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAQUEY, ANTONY, , MR.,**

Mailing Address P.O. BOX 26544

City  
WINSTON SALEM

State  
NC

Zip Code  
27114-6544

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.00

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27643181**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TARR, ANNE, , ,**

Mailing Address 13306 SOUTHWALK

City  
SAN ANTONIO

State  
TX

Zip Code  
78232-4843

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

987.25

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025

**Transaction ID : SA11A.27643409**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

159.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 662 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, DALLAS, , ,**

Mailing Address 2616 CRAZYHORSE PASS

City  
AUSTINState  
TXZip Code  
78734-2814FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643694

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, DALLAS, , ,**

Mailing Address 2616 CRAZYHORSE PASS

City  
AUSTINState  
TXZip Code  
78734-2814FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644554

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMAS, LAUREL, , ,**

Mailing Address 1450FM3006

City  
PLEASANTONState  
TXZip Code  
78064-6748FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

442.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643661

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 663 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TROYER, DENNIS, , ,**

Mailing Address 2192 GLEN COVE WAY

City  
HIGH POINTState  
NCZip Code  
27265-9445FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.75

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643236**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TYPER, DONALD, R., MR.,**

Mailing Address 410 N WEAVER ST

City  
HESSTONState  
KSZip Code  
67062-9041FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLC REALESTATE SERVICESOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.52

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643507**

Amount of Each Receipt this Period

11.88

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VATTHAUER, VIRGENE, A., MRS.,**

Mailing Address 1321STRATFORD COURT

City  
MIDDLETONState  
WIZip Code  
53562-3675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.65

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644184**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

42.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 664 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VIDAL, MILLIE, , ,**

Mailing Address 280 ACACIA AVE

City  
SAN BRUNOState  
CAZip Code  
94066-4845FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643665

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644190

Amount of Each Receipt this Period

7.77

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644543

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 665 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WAHMAN, GERALD, , ,**

Mailing Address PO BOX 789

City  
ALMAState  
ARZip Code  
72921-0789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643075

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALDORF, RAYMOND, , ,**

Mailing Address 1428 INDIANA AVENUE

City

SOUTH PASADENA

State

CA

Zip Code

91030-4110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643346

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALKINGTON, PAT, , ,**

Mailing Address 11765 N 135TH WAY

City

SCOTTSDALE

State

AZ

Zip Code

85259-3633

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

718.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643948

Amount of Each Receipt this Period

4.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

61.76

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 666 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WANTY, SUZANNE, T., ,**

Mailing Address 280 AQUAMARINE DR.

City  
HORTONState  
MIZip Code  
49246-9681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643305**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WARME, PETER, , ,**

Mailing Address 625 THOMPSON AVE

City  
GLENDALEState  
CAZip Code  
91201-2032FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PREMAC INCOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.34

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27642771**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRISTOL MYERS SQUIBBOccupation (for Individual)  
COMPETITIVE INTELLIGENCE STRAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.41

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643200**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 667 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELLS, SHARON, , ,**

Mailing Address 14004 E 24TH AVE

City  
SPOKANE VALLEYState  
WAZip Code  
99037-8341FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NAFICY CENTEROccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643264**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WETZEL, JOAN, C., MS.,**

Mailing Address 2508 PINE ST. APT. F

City  
NEW ORLEANSState  
LAZip Code  
70125-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643269**

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITBREAD, ELLEN, , ,**

Mailing Address 915 SCHOONERS BAY DRIVE

City  
JACKSONVILLEState  
FLZip Code  
32233-2920FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643491**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 668 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITBREAD, ELLEN, , ,**

Mailing Address 915 SCHOONERS BAY DRIVE

City  
JACKSONVILLEState  
FLZip Code  
32233-2920FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643499**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITBREAD, ELLEN, , ,**

Mailing Address 915 SCHOONERS BAY DRIVE

City  
JACKSONVILLEState  
FLZip Code  
32233-2920FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643502**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITESIDE, STEVEN, , ,**

Mailing Address 147 SENECA DRIVE

City  
CLARKSBURGState  
WVZip Code  
26301-4352FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27642774**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

147.88



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 669 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITEMORE, BEBE, , ,**

Mailing Address 4785 MURFREESBORO ROAD

City  
ARRINGTONState  
TNZip Code  
37014-9171FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643586**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27644162**

Amount of Each Receipt this Period

0.20

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIEMAN, WES, , ,**

Mailing Address 713 SPADES RD

City  
SAGLEState  
IDZip Code  
83860-9121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025**Transaction ID : SA11A.27643314**

Amount of Each Receipt this Period

110.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 670 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, JOE, , ,**

Mailing Address 724 BLACK CREEK DR.

City  
CHATTANOOGAState  
TNZip Code  
37419-2190FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644343**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSHIRE, RICK, , ,**

Mailing Address 101 SUMMIT AVE SUITE 410

City  
FORT WORTHState  
TXZip Code  
76102-2611FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WILSHIRE CONSULTANTS INCOccupation (for Individual)  
TAX FINANCIAL PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27644555**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, MARGARET, A., MS.,**

Mailing Address 2005 ARTHUR LANE

City  
AUSTINState  
TXZip Code  
78704-3235FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IC2, UT AUSTINOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.74

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643224**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 671 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, MARGARET, A., MS.,**

Mailing Address 2005 ARTHUR LANE

City  
AUSTINState  
TXZip Code  
78704-3235FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IC2, UT AUSTINOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.74

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643572**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINN, PAT, , ,**

Mailing Address 5959 WINKLER RD

City  
FORT MYERSState  
FLZip Code  
33919-3354FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643764**

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2025**Transaction ID : SA11A.27643571**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

271.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 672 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643576

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, CAROLYN, , ,**

Mailing Address 30 LISA AVE

City  
POPLAR BLUFFState  
MOZip Code  
63901-9094FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642752

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, CAROLYN, , ,**

Mailing Address 30 LISA AVE

City  
POPLAR BLUFFState  
MOZip Code  
63901-9094FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644612

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 673 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YA, JM, , ,

Mailing Address 6263 POPLAR AVENUE

City  
MEMPHISState  
TNZip Code  
38119-4701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642827

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642847

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27642944

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

213.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 674 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27643465

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644303

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2025

Transaction ID : SA11A.27644305

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

161.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 675 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

**Transaction ID : SA11C.27645412**

Amount of Each Receipt this Period

73720.21

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

**Transaction ID : SA11A.27646175**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABED, VICTOR, , ,**

Mailing Address 26 VISTA AVE

City  
TROYState  
NYZip Code  
12180-5239FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWNER OPERATOR

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

**Transaction ID : SA11A.27647081**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

106.18

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 676 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647648

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647649

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** ADAIR, STEFAN, , DR.,

Mailing Address 8591 SKYLINE DR.

City  
LOS ANGELESState  
CAZip Code  
90046-1042FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645750

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.06



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 677 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALFAISAL, FAHD, , ,**

Mailing Address 9424 CHEROKEE

City  
BEVERLY HILLSState  
CAZip Code  
90210-1704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

688.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646594

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALFAISAL, FAHD, , ,**

Mailing Address 9424 CHEROKEE

City  
BEVERLY HILLSState  
CAZip Code  
90210-1704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

688.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646595

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALFAISAL, FAHD, , ,**

Mailing Address 9424 CHEROKEE

City  
BEVERLY HILLSState  
CAZip Code  
90210-1704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

688.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646597

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

137.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 678 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALFAISAL, FAHD, , ,**

Mailing Address 9424 CHEROKEE

City  
BEVERLY HILLSState  
CAZip Code  
90210-1704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

688.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646598

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALFAISAL, FAHD, , ,**

Mailing Address 9424 CHEROKEE

City  
BEVERLY HILLSState  
CAZip Code  
90210-1704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

688.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646599

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALFAISAL, FAHD, , ,**

Mailing Address 9424 CHEROKEE

City  
BEVERLY HILLSState  
CAZip Code  
90210-1704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

688.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646601

Amount of Each Receipt this Period

80.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

219.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 679 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALFAISAL, FAHD, , ,**

Mailing Address 9424 CHEROKEE

City  
BEVERLY HILLSState  
CAZip Code  
90210-1704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

688.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646610**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALLEN, MARC, KEVIN, DR.,**

Mailing Address 485 CLUB DR.

City  
AURORAState  
OHZip Code  
44202-8564FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645884**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, BILLIE, R., MRS.,**

Mailing Address 3203 N COTSWOLD MANOR DR.

City  
KINGWOODState  
TXZip Code  
77339-1597FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647450**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 680 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, BILLIE, R., MRS.,**

Mailing Address 3203 N COTSWOLD MANOR DR.

City  
KINGWOODState  
TXZip Code  
77339-1597FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647461

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AQUAVELLA, JAMES, , DR.,**

Mailing Address 10 HEARTHSTONE RD

City  
PITTSFORDState  
NYZip Code  
14534-1118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNIVERSITY OF ROCHESTEROccupation (for Individual)  
OPHTHALMOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646775

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ARCHER, JAMES, B., MR.,**

Mailing Address P.O. BOX 1644

City  
SONORAState  
TXZip Code  
76950-1644FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645745

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

208.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 681 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARTHUR, GEORGE, , ,**

Mailing Address 7 N. RIVER RD

City  
NASHUAState  
MTZip Code  
59248-9122FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646892**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ASH, SUSAN, , MRS.,**

Mailing Address 1351 KINGSBORO CT

City  
WESTLAKE VILLAGEState  
CAZip Code  
91362-4334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647199**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ASKI, WILLIAM, , ,**

Mailing Address 250 SWARTHOUT RD.

City  
FALL RIVERState  
WIZip Code  
53932-9573FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645823**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

307.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 682 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BACHELDOR, NED, , ,**Mailing Address 630 CAROLINA BAY DR  
APT 209City  
WILMINGTONState  
NCZip Code  
28403-2038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646825**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAILEY, WANDA, , ,**

Mailing Address 112 SOUTH 10TH AVE

City  
TEAGUEState  
TXZip Code  
75860-1724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645986**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAKER, JOHN, , ,**

Mailing Address 3054 HWY 223

City  
DEWITTState  
KYZip Code  
40930-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

415.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646986**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 683 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BALLARD, NANCY, E., MRS.,**

Mailing Address 2110 AUSTIN CT

City  
RICHLANDState  
WAZip Code  
99354-2750FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646781**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BALLARD, NANCY, E., MRS.,**

Mailing Address 2110 AUSTIN CT

City  
RICHLANDState  
WAZip Code  
99354-2750FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646784**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAYDALA, THOMAS, , ,**

Mailing Address 11 YORK ST

City  
MALVERNEState  
NYZip Code  
11565-2313FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BAY ENGINEERING SYSTEMSOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645921**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.77

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 684 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAYDALA, THOMAS, , ,**

Mailing Address 11 YORK ST

City  
MALVERNEState  
NYZip Code  
11565-2313FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BAY ENGINEERING SYSTEMSOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645925**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BELL, ELIZABETH, A., MS.,**

Mailing Address 2421 AMARILLO DR

City  
O FALLONState  
MOZip Code  
63368-3575FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IPCOccupation (for Individual)  
MEDICAL ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.51

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646304**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BELLAH, ERIN, , ,**

Mailing Address 8 BILTMORE ESTATE

City  
PHOENIXState  
AZZip Code  
85016-2810FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646664**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.93



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 685 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BELMONTE, JEAN, R., MRS.,**

Mailing Address 613 CUSTIS ROAD

City  
GLENSIDEState  
PAZip Code  
19038-2013FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645528**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERG, ELIZABETH, , ,**Mailing Address 555 MAIN ST  
APT 606SCity  
NEW YORKState  
NYZip Code  
10044-0165FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647301**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERLIN, STEVEN, , ,**

Mailing Address 12407 DOVER RD

City  
REISTERSTOWNState  
MDZip Code  
21136-5607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

452.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646975**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 686 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERMAN, SANDRA, , ,**

Mailing Address 80 OLYMPIA CHASE DRIVE

City  
LAS VEGASState  
NVZip Code  
89141-6039FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646120**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647468**

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

891.04

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646054**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 687 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BIDDLE, GARY, , ,**

Mailing Address 15 BIDDLE ROAD

City  
CARLISLEState  
PAZip Code  
17015-9794FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SAMTECOccupation (for Individual)  
ENGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646640**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BINGHAM, GLENN, S., MR.,**

Mailing Address 721 STEWARTS RD

City  
LANEXAState  
VAZip Code  
23089-8804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646637**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BINGHAM, GLENN, S., MR.,**

Mailing Address 721 STEWARTS RD

City  
LANEXAState  
VAZip Code  
23089-8804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

566.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646647**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.42

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 688 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BINGHAM, GLENN, S., MR.,**

Mailing Address 721 STEWARTS RD

City  
LANEXAState  
VAZip Code  
23089-8804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646655**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUGHER, ARTHUR KENNETH, , ,**

Mailing Address 103 CIRCLE DR

City  
MAYFIELDState  
KYZip Code  
42066-6902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OLD HICKORY CLAY COOccupation (for Individual)  
TECHNICAL DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.53

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646872**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYLE, WILLIAM, , ,**

Mailing Address 4807 FAIRFORD DR.

City  
SAN ANTONIOState  
TXZip Code  
78228-1013FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MILITARY MINISTRY OF CRUOccupation (for Individual)  
FIELD MISSIONARY STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

332.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646569**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 689 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYNTON, LINDA, A., ,**

Mailing Address 15877 FOUR CORNER RD

City  
PRAIRIE GROVE

State  
AR

Zip Code  
72753-9244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27646458**

Amount of Each Receipt this Period

20.22

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOZEMAN, BARBARA, , ,**

Mailing Address 2414 HIGHWAY 53 E

City  
JASPER

State  
GA

Zip Code  
30143-4346

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27645809**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRACKEN, KAY, , ,**

Mailing Address 405 HAMVASY

City  
TYLER

State  
TX

Zip Code  
75701-5324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRACKEN INTEREST

Occupation (for Individual)  
OIL AND GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2334.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27645541**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

149.32

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 690 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRACKEN, KAY, , ,

Mailing Address 405 HAMVASY

City  
TYLERState  
TXZip Code  
75701-5324FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRACKEN INTERESTOccupation (for Individual)  
OIL AND GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2334.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646343

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRANTON, DOROTHY, , ,

Mailing Address 26 PROVIDENT OAKS

City

BOSSIER CITY

State

LA

Zip Code

71111-5456

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645712

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BROCK, KENNETH, , ,

Mailing Address 408 N 9TH STREET

City

NEW BADEN

State

IL

Zip Code

62265-1137

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

533.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647539

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

239.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 691 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROOKHART, PATRICIA, F., MS.,**Mailing Address 514 LIMERICK CIR  
UNIT 301City  
LUTHVLE TIMONState  
MDZip Code  
21093-8187FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

974.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	03	/	2025

**Transaction ID : SA11A.27646455**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	03	/	2025

**Transaction ID : SA11A.27647355**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, JENISE, , ,**

Mailing Address 10370 SW WESTLAWN BLVD

City  
PORT SAINT LUCIEState  
FLZip Code  
34987-2463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	03	/	2025

**Transaction ID : SA11A.27646344**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 692 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645642**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645652**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645657**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

42.69



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 693 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, WILLIAM, BRYANT, MR.,**

Mailing Address 408 FELLSWOOD PLACE

City  
LOUISVILLEState  
KYZip Code  
40243-1209FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.90

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647196**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITYState  
NJZip Code  
08226-2367FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.96

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646705**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURKE, KIM, , MR.,**

Mailing Address 4800 HARTMNN RD

City  
MOUNT VERNONState  
INZip Code  
47620-7718FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646481**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

218.95

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 694 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BYERS, RODNEY, , ,**

Mailing Address W11103 LINDA CIRCLE

City  
LODIState  
WIZip Code  
53555-1563FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
R D ENGINEERINGOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646616**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CABREJA, FELIX, , ,**

Mailing Address 510 4TH STREET, HOUSE

City

PALISADES PARK

State

NJ

Zip Code

07650-2316

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646689**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CADY, WILLIAM, CURTIS, MR.,**

Mailing Address 1426 SOUTH 50TH STREET

City

KANSAS CITY

State

KS

Zip Code

66106-1726

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645529**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

242.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 695 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, FRANCIS, C., MR.,**

Mailing Address 5432 S SALVATION PL.

City  
SIOUX FALLSState  
SDZip Code  
57108-8543FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646586**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARLIN, JOHN, P., ,**

Mailing Address 32 KIMBLE AVE.

City  
RIO GRANDEState  
NJZip Code  
08242-1716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647150**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646276**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 696 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARR, HARLEY, , MR.,**

Mailing Address 17011 CEDAR PLZ APT 6C

City  
OMAHAState  
NEZip Code  
68130-2379FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647171**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARROLL, DAVID, , ,**

Mailing Address 2727 SYLVAN WAY

City  
MCKINNEYState  
TXZip Code  
75072-4048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647584**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARSTENSEN, DENNIS, , ,**

Mailing Address 1107 PERSHING BLVD

City  
CLINTONState  
IAZip Code  
52732-5207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

294.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646277**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 697 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARTER, CHRISTINE, , ,**

Mailing Address 1199 OVERLOOK DR.

City  
SIERRA VISTAState  
AZZip Code  
85635-5511FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646303

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARTER, CHRISTINE, , ,**

Mailing Address 1199 OVERLOOK DR.

City  
SIERRA VISTAState  
AZZip Code  
85635-5511FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646826

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARTER, CHRISTINE, , ,**

Mailing Address 1199 OVERLOOK DR.

City  
SIERRA VISTAState  
AZZip Code  
85635-5511FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

775.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646829

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 698 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARTER, CHRISTINE, , ,**

Mailing Address 1199 OVERLOOK DR.

City  
SIERRA VISTAState  
AZZip Code  
85635-5511FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646838

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARTER, CHRISTINE, , ,**

Mailing Address 1199 OVERLOOK DR.

City  
SIERRA VISTAState  
AZZip Code  
85635-5511FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646841

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARTER, CHRISTINE, , ,**

Mailing Address 1199 OVERLOOK DR.

City  
SIERRA VISTAState  
AZZip Code  
85635-5511FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

775.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646842

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

83.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 699 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARTER, CHRISTINE, , ,**

Mailing Address 1199 OVERLOOK DR.

City  
SIERRA VISTAState  
AZZip Code  
85635-5511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646844**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARTER, CHRISTINE, , ,**

Mailing Address 1199 OVERLOOK DR.

City  
SIERRA VISTAState  
AZZip Code  
85635-5511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646847**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARVER, CYNDI, , ,**Mailing Address 25739 135TH AVE SE  
UNIT 71City  
KENTState  
WAZip Code  
98042-3551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647022**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

51.44

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 700 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CASPERSON, CAROLINA, , MS.,

Mailing Address 100 SAINT PAUL ST, STE 700

City  
DENVERState  
COZip Code  
80206-5143FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MUSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645795

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CEDERHOLM, BECKY, , ,

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645495

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CEDERHOLM, BECKY, , ,

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645894

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

51.60



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 701 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645913

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646984

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHARLTON, VINCENT, R., ,**

Mailing Address 104 CREEK POINT CT

City  
COLONIAL HEIGHTSState  
VAZip Code  
23834-2215FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646924

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 702 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHARLTON, VINCENT, R., ,**

Mailing Address 104 CREEK POINT CT

City  
COLONIAL HEIGHTSState  
VAZip Code  
23834-2215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646929**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHASE, RICHARD, , ,**

Mailing Address 2370 YORK ROAD, SUITE C4

City  
JAMISONState  
PAZip Code  
18929-1031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CHASE & ASSOCIATES, INC.Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647667**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHOW, ADA, , ,**

Mailing Address 2100 TOWERS , PH1

City  
COCOA BEACHState  
FLZip Code  
32931-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1010.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645905**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

206.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 703 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHRESTENSEN, PAUL, , ,**

Mailing Address 148 EDGEMERE WAY S

City  
NAPLESState  
FLZip Code  
34105-7107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646258

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHRISTIANSEN, ALAN, L., MR.,**

Mailing Address 12121 W. WILMINGTON RD.

City  
PEOTONEState  
ILZip Code  
60468-9726FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647547

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CITRON, DIANE, M., MRS.,**

Mailing Address 2620 ARIZONA AVE, APT 3

City  
SANTA MONICAState  
CAZip Code  
90404-1415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

613.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646382

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

134.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 704 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COACHYS, RICH, , ,**

Mailing Address 314 TUPELO TR

City  
CANTONState  
GAZip Code  
30114-5734FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LITEFIGHTER SYSTEMS, LLCOccupation (for Individual)  
MANUFACTURING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646565

Amount of Each Receipt this Period

300.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COHEN, JOEL, D., MR.,**

Mailing Address 2410 ROCHESTER RDD

City  
ROYAL OAKState  
MIZip Code  
48073-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647105

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646119

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

409.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 705 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646139

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646144

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORMIER, WILLIAM, , MR.,**

Mailing Address 1025 MAIN ST

City  
LEOMINSTERState  
MAZip Code  
01453-1909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

502.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647251

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 706 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORTESE, FRIEDA, , ,**

Mailing Address 24 WESTBOURNE LANE

City  
MELVILLEState  
NYZip Code  
11747-3305FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647512

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COURTNEY, JOHN, , ,**

Mailing Address 1298 SILVERWOOD DRIVE

City  
OKEMOSState  
MIZip Code  
48864-3092FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647457

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COWEN, STEPHEN, , MR.,**

Mailing Address 154 ESSEX DR.

City  
TENAFLYState  
NJZip Code  
07670-2300FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COWEN JACOBSOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647125

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 707 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COX, JUNE, , ,**

Mailing Address 159 NTH 4TH AVE

City  
FORSYTH

State  
MT

Zip Code  
59327-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27645998**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POST

State  
NY

Zip Code  
14870-9345

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27646548**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POST

State  
NY

Zip Code  
14870-9345

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27646554**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

118.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 708 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646556

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646557

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646560

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.93



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 709 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646563

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646600

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIGO, JACQUELINE, L., MS.,**

Mailing Address 1049 SUMMIT DR

City  
MOUNT VERNONState  
OHZip Code  
43050-9576FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1371.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646901

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

154.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 710 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRIST, JACK, , ,**

Mailing Address 1944 UNIVERSITY PARK DR

City  
SACRAMENTOState  
CAZip Code  
95825-8211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645753**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CROUSEN, GUINN, , ,**

Mailing Address 4435 BUENA VISTA ST

City  
DALLASState  
TXZip Code  
75205-4118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646162**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CUKJATI, JOSEPH, F., MR.,**Mailing Address P.O. BOX 677  
STE 115City  
VENUSState  
TXZip Code  
76084-0677FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

985.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647349**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

269.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 711 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CULBERTSON, LLOYD, , ,**

Mailing Address 10705S SW 69TH CT.

City  
PINECRESTState  
FLZip Code  
33156-3932FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647241**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURTIS, SUSAN, , ,**Mailing Address 19501 40TH AVE W  
UNIT 519City  
LYNNWOODState  
WAZip Code  
98036-5976FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646578**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DALLAVERDE, ANGELO, , ,**

Mailing Address 20A HEISZ ST

City  
KINGSTONState  
PAZip Code  
18704-4453FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

331.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645961**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 712 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DANIELS, CAROL, B., MS.,**

Mailing Address 3091 ORCHARD RIDGE CIR

City  
DULUTHState  
GAZip Code  
30096-7422FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647006**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647166**

Amount of Each Receipt this Period

21.07

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAVIDSON, JO, , ,**

Mailing Address POBOX336

City  
WASHINGTONState  
OKZip Code  
73093-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646236**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 713 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAVIS, HOLT, , ,**

Mailing Address 2213 RUSSELL MCPHERSON RD

City  
BURLINGTONState  
NCZip Code  
27215-8624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647222**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DE BEUKELAER, PETER, , ,**

Mailing Address 182 SWAN SEA LANE

City  
MADISONState  
MSZip Code  
39110-9429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PETER DE BEUKELAEROccupation (for Individual)  
PRESIDENT DBC CORP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647605**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEGRISSELLES, JANET, , ,**

Mailing Address 14638 SAGAMORE COURT

City  
FORT MYERSState  
FLZip Code  
33908-4912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646320**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.38

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 714 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEGRISSELLES, JANET, , ,**

Mailing Address 14638 SAGAMORE COURT

City  
FORT MYERSState  
FLZip Code  
33908-4912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646323

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEGRISSELLES, JANET, , ,**

Mailing Address 14638 SAGAMORE COURT

City  
FORT MYERSState  
FLZip Code  
33908-4912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646326

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEGROODT, RALPH, , ,**

Mailing Address 31661 WELL BOTTOM RD

City  
GALENAState  
MDZip Code  
21635-1334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

309.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646254

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

122.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 715 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DESLONGCHAMPS, ROBERT, W., MR.,**

Mailing Address 205 E ROCKINGHAM ST

City  
ELKTONState  
VAZip Code  
22827-1503FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647288

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIBARTOLOMEO, BETTY, M., MS.,**

Mailing Address 135 OAKMONT CIR.

City  
PINEHURSTState  
NCZip Code  
28374-8342FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647385

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIEDERICH, NORMAN, F., DR.,**

Mailing Address 9004 TIMBER EDGE DR.

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-6321FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646992

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

321.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 716 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIONNE, DOUGLAS, , ,**

Mailing Address 6122 WINDY KNL

City  
WINDCRESTState  
TXZip Code  
78239-2655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647063**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOBBIE, ANN, , ,**

Mailing Address 163 WEST STERLING POND CIRCLE

City  
SPRINGState  
TXZip Code  
77382-1006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PET SITTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647303**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DORRE, JAMES, , ,**

Mailing Address 1206 SPRING VILLA CT

City  
JACKSONVILLEState  
NCZip Code  
28540-3313FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.89

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647406**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

58.88



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 717 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOVER, BRENDA, , ,**

Mailing Address 28656 DEER RUN ST

City  
MONTGOMERYState  
TXZip Code  
77356-3990FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOVER INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

747.83

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645559**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRIGGERS, PATRICIA, , ,**

Mailing Address 126 PECAN ROW LANE

City  
ALEXANDRIAState  
LAZip Code  
71303-8711FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.61

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647620**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNCAN, CHARLES, L., MR.,**

Mailing Address 202 PRESERVATION CIRCLE

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-8220FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.47

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646484**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 718 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUVALL, LARRY, , ,**

Mailing Address 28435 N74 TH ST

City  
SCOTTSDALEState  
AZZip Code  
85266-2167FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CLK INCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.38

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646456**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EALY, ANNE, H., ,**Mailing Address 4328 E CAPRI AVE  
UNIT 153City  
MESAState  
AZZip Code  
85206-1973FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.11

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646910**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EALY, ANNE, H., ,**Mailing Address 4328 E CAPRI AVE  
UNIT 153City  
MESAState  
AZZip Code  
85206-1973FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.11

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646917**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

54.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 719 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EALY, ANNE, H., ,**Mailing Address 4328 E CAPRI AVE  
UNIT 153City  
MESAState  
AZZip Code  
85206-1973FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646933**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647289**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EDMUNDS, CHARLOTTE, , MS.,**

Mailing Address 13090 SOUTHAMPTON DR.

City  
BONITA SPRINGSState  
FLZip Code  
34135-3405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647162**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 720 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EDWARDS, SHEFFIELD, , , III**

Mailing Address 13256 GOLDEN DRIVE

City  
SUMERDUCKState  
VAZip Code  
22742-1714FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EDWARDS CUSTOMOccupation (for Individual)  
POOL PLASTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.36

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646717**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EDWARDS, WALTER, C., DR.,**

Mailing Address 404 TOWNSEND PL NW

City  
ATLANTAState  
GAZip Code  
30327-3038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646774**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSONState  
MDZip Code  
21204-4701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645466**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

142.22

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 721 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSONState  
MDZip Code  
21204-4701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645468

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSONState  
MDZip Code  
21204-4701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646517

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELNAGGAR, ADEL, , ,**

Mailing Address 548 S.4 RD ST.

City  
BELLAIREState  
TXZip Code  
77401-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UT, MD ANDERSONOccupation (for Individual)  
M.D

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646389

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

261.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 722 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645619

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645620

Amount of Each Receipt this Period

3.96

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645621

Amount of Each Receipt this Period

26.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

48.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 723 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645624

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645628

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647446

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

39.52

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 724 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647448**

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647449**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.56

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647451**

Amount of Each Receipt this Period

26.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.67



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 725 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647453

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647456

Amount of Each Receipt this Period

18.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647466

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 726 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645573**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ESPELAND, ROBERT, R., ,**

Mailing Address 13705 NW 44TH AVE

City  
VANCOUVERState  
WAZip Code  
98685-1538FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647624**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ESPELAND, ROBERT, R., ,**

Mailing Address 13705 NW 44TH AVE

City  
VANCOUVERState  
WAZip Code  
98685-1538FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647626**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 727 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EVANS, DONALD, , ,**

Mailing Address 42085 WEST CRIBBAGE ROAD

City  
MARICOPAState  
AZZip Code  
85138-3928FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646286

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EWING, DONNA, , MS.,**

Mailing Address 18106 REDBUD CIRCLE

City  
FOUNTAIN VALLEYState  
CAZip Code  
92708-5753FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645883

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EWING, DONNA, , MS.,**

Mailing Address 18106 REDBUD CIRCLE

City  
FOUNTAIN VALLEYState  
CAZip Code  
92708-5753FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645887

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

137.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 728 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647573**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FANIZZI, ANN, , ,**

Mailing Address 2505 MORGAN DRIVE

City  
CARMELState  
NYZip Code  
10512-2612FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647064**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FANKHOUSER, JERRY, W., MR.,**

Mailing Address 920 KINZUA RD

City  
WARRENState  
PAZip Code  
16365-9627FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645807**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 729 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.12

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645413**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646396**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646407**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 730 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FIELDS, DEBORAH, , ,**

Mailing Address 8758 SE HWY 66

City  
GALENAState  
KSZip Code  
66739-1675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647244

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FIELDS, PATRICIA, , MS.,**Mailing Address 3455 CAMINITO SIERRA  
UNIT 302City  
CARLSBADState  
CAZip Code  
92009-8668FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646032

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FIOLA, SHARON, , ,**

Mailing Address 2041 UTAH RD

City  
RANTOULState  
KSZip Code  
66079-9024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646662

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

156.26

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 731 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISCHER, EDDIE, R., MR.,**

Mailing Address 2020 E ORANGETHORPE AVE

City  
FULLERTON

State  
CA

Zip Code  
92831-5327

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VISITA PAINT INC.

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.95

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

**Transaction ID : SA11A.27646190**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLOYD, JOHN, D., ,**

Mailing Address 3418 NORTHBORO CT.

City  
MURFREESBORO

State  
TN

Zip Code  
37129-1208

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.08

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

**Transaction ID : SA11A.27645772**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FORD, BEVERLY, , ,**

Mailing Address 4350 COVE ISLAND DRIVE NORTHEAST

City  
MARIETTA

State  
GA

Zip Code  
30067-3614

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.09

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

**Transaction ID : SA11A.27647662**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

95.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 732 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORD, TOM, , ,**

Mailing Address 7526 BEAU TERRE

City  
CORPUS CHRISTIState  
TXZip Code  
78414-6290FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
US NAVYOccupation (for Individual)  
GS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645799**

Amount of Each Receipt this Period

94.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FORT, BRENDA, , ,**

Mailing Address 3572 ALDER PL

City  
CHINO HILLSState  
CAZip Code  
91709-2007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646422**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANCOIS, JEAN, N., ,**

Mailing Address 39 NICHOLSON DR

City  
BROCKTONState  
MAZip Code  
02302-2249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LSHOccupation (for Individual)  
NURSING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645780**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 733 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645962

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRATELLO, DAVID, , ,**

Mailing Address 111 TYLER T

City  
STEPHENS CITYState  
VAZip Code  
22655-2371FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647523

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FULLER, JOHN, D., MR.,**

Mailing Address 279 TOURNAMENT LN.

City  
FREEPORTState  
FLZip Code  
32439-6241FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

920.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647566

Amount of Each Receipt this Period

17.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

314.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 734 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FULLMER, DAVID, W., ,**

Mailing Address 2185 NORTH 1200 EAST

City  
NORTH LOGANState  
UTZip Code  
84341-1838FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CACHE COUNTY SCHOOL DISTRICTOccupation (for Individual)  
FIRE ALARM BUILDING MAINTENANC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.25

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647130**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GATTO, PAMELA, , ,**

Mailing Address 15 W. HIBISCUS BLVD

City  
MELBOURNEState  
FLZip Code  
32901-3017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MIKE GATTO, INCOccupation (for Individual)  
TIRE DEALER/BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645688**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.55

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647298**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

147.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 735 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GELBMAN, JOEL, , ,**

Mailing Address 6476 ARRIBA AVE

City  
NAPLESState  
FLZip Code  
34113-9061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645738**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GHEBREMEDHIN, BERHANE, , ,**

Mailing Address 1520 DOVE CY

City  
PASADENAState  
CAZip Code  
91107-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DPSS LA COUNTYOccupation (for Individual)  
ELIGIBILITY SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1270.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646719**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIBSON, JUDY, , ,**

Mailing Address 2233 WHISPERING COVE

City  
DECATURState  
GAZip Code  
30033-2055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645679**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 736 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILBERT, AUSTIN, , ,**

Mailing Address P.O. BOX 3009

City  
FLORENCEState  
SCZip Code  
29502-3009FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GILBERT CONSTRUCTIONOccupation (for Individual)  
BUILDING CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646401**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILMAN, GERALD, , ,**

Mailing Address 33134 LAKE GARRISON STREET

City  
FREMONTState  
CAZip Code  
94555-1222FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646086**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILMAN, GERALD, , ,**

Mailing Address 33134 LAKE GARRISON STREET

City  
FREMONTState  
CAZip Code  
94555-1222FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646102**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

210.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 737 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIORDANO, MICHAEL, , ,**

Mailing Address 59 YOWAGO AVE

City  
BRANFORDState  
CTZip Code  
06405-5526FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIORDANOOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3029.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645992**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLENN, SAMUEL, , , JR.**Mailing Address 5490 ARBOR BRANCH DR.  
APT 234City  
SHALLOTTEState  
NCZip Code  
28470-6111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646896**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLOVER, AVERIL, , ,**

Mailing Address 446 LANCASHIRE RUN

City  
SMITHFIELDState  
NCZip Code  
27577-8029FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646003**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 738 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOLDENBERG, ALEC, S., DR.,**Mailing Address 99 PARK AVE  
FLOOR 2City  
NEW YORKState  
NYZip Code  
10016-1602FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646305**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOMBERG, GALINA, , ,**

Mailing Address 96 CARRICK CIR.

City  
HAYWARDState  
CAZip Code  
94542-7912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1414.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646322**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646393**

Amount of Each Receipt this Period

73.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

358.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 739 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647269**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORDON, LOUISE, , ,**

Mailing Address 4075 BROOKS MILL DRIVE

City  
LITHONIAState  
GAZip Code  
30038-4143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1230.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647248**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, LOUISE, , ,**

Mailing Address 4075 BROOKS MILL DRIVE

City  
LITHONIAState  
GAZip Code  
30038-4143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1230.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647404**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 740 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOTTWIG, JOHN, , ,**

Mailing Address 19422 S MUNSON ROAD

City  
MOLALLAState  
ORZip Code  
97038-8666FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647278

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRABER, GARY, , MR.,**

Mailing Address 9927 TERRITORY LN

City  
HOUSTONState  
TXZip Code  
77064-5227FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647207

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRANT, DAVISON, , ,**

Mailing Address P.O. BOX 26236

City  
AUSTINState  
TXZip Code  
78755-0236FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645598

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.25



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 741 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAYBASH, PETER, J., MR., JR.**

Mailing Address 4 CAMBRIDGE DR.

City  
HERSHEYState  
PAZip Code  
17033-2100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647334

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, CALVIN, , ,**

Mailing Address 1601 LEXINGTON RD

City  
PLEASANT HILLState  
MOZip Code  
64080-1123FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LSR7Occupation (for Individual)  
BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646608

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREENWOOD, KEITH, , ,**

Mailing Address 1250 S SANDBRANCH

City  
MOUNT HOPEState  
WVZip Code  
25880-9068FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PLUMBER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

580.56

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645765

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

186.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 742 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, LINCOLN, I., MR., JR.**Mailing Address 1002 ALTAVITA CT  
APT 210City  
LONGMONTState  
COZip Code  
80503-3684FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645486**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, LINDA, , ,**

Mailing Address 15657 FM 244

City  
IOLAState  
TXZip Code  
77861-3867FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645859**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREINER, MICHAEL, J., ,**

Mailing Address PO BOX 621

City  
MARSTONS MILLSState  
MAZip Code  
02648-0621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

945.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646749**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

154.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 743 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREINER, MICHAEL, J., ,**

Mailing Address PO BOX 621

City  
MARSTONS MILLSState  
MAZip Code  
02648-0621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646921**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIFFITH, SCOTT, , MR.,**

Mailing Address 9 FAWN RIDGE CT

City  
REISTERSTOWNState  
MDZip Code  
21136-5654FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646937**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROGAN, KIMBERLY, , ,**

Mailing Address PO BOX 875

City  
MANHATTAN BEACHState  
CAZip Code  
90267-0875FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646756**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 744 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARD

State  
OH

Zip Code  
43026-3125

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

**Transaction ID : SA11A.27645476**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARD

State  
OH

Zip Code  
43026-3125

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

**Transaction ID : SA11A.27645477**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARD

State  
OH

Zip Code  
43026-3125

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.52

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

**Transaction ID : SA11A.27645478**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 745 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645746

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645757

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645763

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 746 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROSE, ROY, , ,**

Mailing Address 1401 FOURAKER RD

City  
JACKSONVILLEState  
FLZip Code  
32221-6682FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647252

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROSSMAN, ARON, , ,**

Mailing Address 2144 E 69 STREET, 2

City  
BROOKLYNState  
NYZip Code  
11234-6173FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645551

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUNNIN, THOMAS, , MR.,**

Mailing Address 23607 LAST RUN

City  
SAN ANTONIOState  
TXZip Code  
78260-4901FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GUNNIN INSURANCE & RISK MANAGEMENT, INOccupation (for Individual)  
INSURANCE BROKERAGE OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646429

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 747 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAAG, TIM, , ,**

Mailing Address 4701 GRANDVIEW CT

City  
MC FARLANDState  
WIZip Code  
53558-9333FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE COLLECTION SERVICEOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646649

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAAG, TIM, , ,**

Mailing Address 4701 GRANDVIEW CT

City  
MC FARLANDState  
WIZip Code  
53558-9333FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE COLLECTION SERVICEOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646650

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAAG, TIM, , ,**

Mailing Address 4701 GRANDVIEW CT

City  
MC FARLANDState  
WIZip Code  
53558-9333FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE COLLECTION SERVICEOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646667

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 748 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAAG, TIM, , ,**

Mailing Address 4701 GRANDVIEW CT

City  
MC FARLANDState  
WIZip Code  
53558-9333FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STATE COLLECTION SERVICEOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646674**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANNA, SYLVIA, , ,**

Mailing Address 6109 N GALENA RD

City  
PEORIAState  
ILZip Code  
61614-3605FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647365**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HANSEN, TERESA, , ,**

Mailing Address 2917 , KANDAHAR DR

City  
SAINT CHARLESState  
MOZip Code  
63303-3166FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645713**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 749 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANSEN, TERESA, , ,**

Mailing Address 2917 , KANDAHAR DR

City  
SAINT CHARLESState  
MOZip Code  
63303-3166FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645714**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARBER, BARBIE, , ,**

Mailing Address 4910 LAKEWOOD ST

City  
HARRISONState  
MIZip Code  
48625-9645FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647589**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRAH, TONY, , ,**

Mailing Address 355 BOXINGTON WAY

City  
SPARKSState  
NVZip Code  
89434-8904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2456.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646274**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

184.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 750 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRIS, DIANE, , ,**

Mailing Address 5021 WEST 4075 SOUTH

City  
WEST HAVENState  
UTZip Code  
84401-9386FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645599

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRIS, DIANE, , ,**

Mailing Address 5021 WEST 4075 SOUTH

City  
WEST HAVENState  
UTZip Code  
84401-9386FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645605

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRIS, MARY, , ,**

Mailing Address 118 KOPECKY ROAD

City  
SELMAState  
ALZip Code  
36701-6921FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646741

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 751 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARWARD, JAMES, , ,**

Mailing Address 322 NEW KENT PLACE

City  
CARYState  
NCZip Code  
27511-4584FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.88

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

Transaction ID : SA11A.27646424

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAWKINS, JUANITA, , MS.,**

Mailing Address 40 VANDERVEER DR.

City

BASKING RIDGE

State

NJ

Zip Code

07920-3746

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

Transaction ID : SA11A.27647088

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEDEBY, RICKARD, , MR.,**

Mailing Address 14251 SOUTH 12TH PLACE

City

PHOENIX

State

AZ

Zip Code

85048-4404

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INTERTEC INTERNATIONALOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

317.20

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

Transaction ID : SA11A.27645445

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 752 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEISLER, WILLIAM, , ,**

Mailing Address 1177 CLARENCE BARHAM RD

City  
BETHEL SPRINGSState  
TNZip Code  
38315-4527FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645446**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEITZ, MARK, V., MR.,**

Mailing Address 260 SW YORKSHIRE ROAD

City  
TOPEKAState  
KSZip Code  
66606-2283FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1438.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645660**

Amount of Each Receipt this Period

312.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENRY, JAMES, R., MR.,**

Mailing Address 2608 COLLEGE DRIVE

City  
VICTORIAState  
TXZip Code  
77901-4482FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE AND SECURITIES SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647650**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

426.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 753 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERSHBERGER, SHEILA, , ,**

Mailing Address 537 MELROSE ST.

City  
AKRONState  
OHZip Code  
44305-2813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMMUNITY BAPTIST CHURCHOccupation (for Individual)  
PASTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647007**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HESS, SUZANNE, , ,**

Mailing Address 5590 N BARRASCA AVE

City  
TUCSONState  
AZZip Code  
85750-6494FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645937**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HESTER, DON, , ,**

Mailing Address 3981 F. ST.

City  
EUREKAState  
CAZip Code  
95503-6003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

314.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646552**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 754 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEWETT, WILLIAM, , MR.,**

Mailing Address 8920 E QUAIL COVE LN

City  
GOLD CANYONState  
AZZip Code  
85118-3009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646154

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HIGGINS, NEILA, , ,**

Mailing Address 3916 N POTSDAM AVE #3760

City  
SIOUX FALLSState  
SDZip Code  
57104-7048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647216

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIGHTOWER, JOHN, , ,**

Mailing Address 2115 SE 31ST ST

City  
OKEECHOBEEState  
FLZip Code  
34974-6721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646241

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

123.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 755 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOBBS, JAMES, , ,**

Mailing Address 1185 BULLFROG RD

City  
FAIRFIELDState  
PAZip Code  
17320-9156FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
WELDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647534

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOFFMAN, GARY, , ,**

Mailing Address 10561 HAWKS LANDING TERRACE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646520

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOGG, THERESA, , ,**

Mailing Address 1939 CARRAWAY ST

City  
BIRMINGHAMState  
ALZip Code  
35235-1948FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

371.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646315

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 756 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLLAR, KENNETH, , ,**

Mailing Address 120 ALLEGHANY DRIVE

City  
SALISBURYState  
NCZip Code  
28147-7229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645448**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOOPER, WILLIAM, , MR.,**

Mailing Address 249 RUSTIC CANYON DR.

City  
GRANTS PASSState  
ORZip Code  
97526-8848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647572**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOPKINS, GEORGE, , ,**

Mailing Address 135 CR 2984

City  
HUGHES SPRINGSState  
TXZip Code  
75656-6715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646210**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.28



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 757 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUBER, MARY, R., ,**

Mailing Address 37641 30TH STREET

City  
ELMOREState  
MNZip Code  
56027-2035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.68

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646739**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUGHES, THEO, , ,**

Mailing Address 5502 GLENLIVET PL

City  
GREENVILLEState  
TXZip Code  
75402-4204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.30

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647535**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUNT, SUSAN, , ,**

Mailing Address 522 N CANADIAN TER

City  
MUSTANGState  
OKZip Code  
73064-6105FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.08

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645536**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 758 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUSTAD, JANET, , ,**

Mailing Address 51806 PELICAN POINT DRIVE

City  
DETROIT LAKESState  
MNZip Code  
56501-9405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

898.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646770

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUSTAD, JANET, , ,**

Mailing Address 51806 PELICAN POINT DRIVE

City  
DETROIT LAKESState  
MNZip Code  
56501-9405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

898.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646771

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUSTAD, JANET, , ,**

Mailing Address 51806 PELICAN POINT DRIVE

City  
DETROIT LAKESState  
MNZip Code  
56501-9405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

898.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647194

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

48.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 759 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUSTAD, JANET, , ,**

Mailing Address 51806 PELICAN POINT DRIVE

City  
DETROIT LAKESState  
MNZip Code  
56501-9405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

898.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647221**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACKSON, MARLA, , ,**

Mailing Address 14959 CURRY ST

City  
MORENO VALLEYState  
CAZip Code  
92553-5019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646963**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAUDES, MARY, K., MRS.,**

Mailing Address 12657 BRADFORD WOODS DR.

City  
SAINT LOUISState  
MOZip Code  
63127-1360FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647629**

Amount of Each Receipt this Period

12.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 760 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEANS, JOHN, , ,**Mailing Address 235 INVERNESS CENTER DRIVE  
APT 201City  
BIRMINGHAMState  
ALZip Code  
35242-5606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646893

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646281

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646672

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 761 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646678

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646681

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646684

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 762 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JENNINGS, SUSAN, , ,**

Mailing Address 722 CALLE PERLINO

City  
SAN CLEMENTEState  
CAZip Code  
92673-2718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646483

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JENSEN, V., GAIL, ,**

Mailing Address 405 ANGLERSDRIVE, UNIT 1-185

City  
STEAMBOAT SPRINGSState  
COZip Code  
80487-9352FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647351

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JERNIGAN, JOHNNY, , ,**

Mailing Address 2328 E LAKEVIEW AVE

City  
PENSACOLAState  
FLZip Code  
32503-4929FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOHNNY JERNIGANOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646479

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 763 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, KAY, , ,**

Mailing Address 800 NAVAJO AVE

City  
FORT MORGANState  
COZip Code  
80701-4081FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647569

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON HALL, VALORIE, , ,**

Mailing Address 316 SOUTH COLBORN STREET

City  
IOLAState  
KSZip Code  
66749-3408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ANESTHESIA PROVIDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646337

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOLLEY, SUE, , MS.,**

Mailing Address 2807 CROSSVINE CIRCLE

City  
THE WOODLANDSState  
TXZip Code  
77380-1396FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

503.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646696

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

162.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 764 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646173

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646178

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646182

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 765 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646187

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646222

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646231

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

16.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 766 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646234

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646259

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646265

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 767 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWSState  
TXZip Code  
79714-2010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646991

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JORDAN, LYNNE, , ,**

Mailing Address 3 MCCOY CIRCLE

City  
KEY WESTState  
FLZip Code  
33040-3913FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646387

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOYCE, RICHARD, , ,**Mailing Address 1350 E NORTH ST  
LOT 84City  
CROWN POINTState  
INZip Code  
46307-6400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

284.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647000

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

137.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 768 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAPIO, JENNIFER, , ,**

Mailing Address 424 E NORTH WATER STREET

City  
CHICAGOState  
ILZip Code  
60611-5511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MDCOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.10

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647392**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646623**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEMP, KIRKLAND, , ,**

Mailing Address 2188 WASHINGTON AVE

1

City  
BRONXState  
NYZip Code  
10457-2589FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.30

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646324**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 769 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEMP, REGINA, , ,**

Mailing Address 135 FOXHOLLIES BLVD

City  
BESSEMERState  
ALZip Code  
35022-5026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646179**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KERNS, DIANA, , ,**

Mailing Address 3529 CHELLEN DRIVE

City  
FARMERS BRANCHState  
TXZip Code  
75234-6621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647657**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, TANYA, LUNN, MRS.,**

Mailing Address 1048 ELLERBE CT.

City  
SHREVEPORTState  
LAZip Code  
71106-7757FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645840**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 770 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KIRBY, RICHARD, C., MR., IV**

Mailing Address 4126 NEFF LAKE RD

City  
BROOKSVILLEState  
FLZip Code  
34601-8101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646524**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIRKHAM, ROGER, , ,**

Mailing Address 3860 BOULDER PATCH

City  
RENOState  
NVZip Code  
89511-3261FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646118**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLOCK, MARY, , ,**

Mailing Address 5500 N 67TH PL

City  
PARADISE VALLEYState  
AZZip Code  
85253-5923FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

334.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647634**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 771 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNOX, DONNA, , ,**

Mailing Address 5055 W C30A # 1016

City  
SANTA ROSA BEACHState  
FLZip Code  
32459-4373FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645869

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOHLHOFF, HANSPETER, , MS.,**

Mailing Address 1545 ARBORETUM DRIVE UNIT 129

City  
OSHKOSHState  
WIZip Code  
54901-9300FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646729

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KORENEK, LAWRENCE, , ,**

Mailing Address 421FRELS

City  
EL CAMPOState  
TXZip Code  
77437-2063FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BANKEROccupation (for Individual)  
LENDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645784

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 772 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KORENEK, LAWRENCE, , ,**

Mailing Address 421FRELS

City  
EL CAMPOState  
TXZip Code  
77437-2063FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BANKEROccupation (for Individual)  
LENDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646069**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRAUTSCHUN, HARVEY, , ,**

Mailing Address 10791 CHICKEN CREEK ROAD

City  
SPEARFISHState  
SDZip Code  
57783-4111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646832**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KRAUTSCHUN, HARVEY, , ,**

Mailing Address 10791 CHICKEN CREEK ROAD

City  
SPEARFISHState  
SDZip Code  
57783-4111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646840**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 773 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645415

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LACKEY, ANN, , ,**

Mailing Address 1117 SPRUCE STREET

City  
LAKE OSWEGOState  
ORZip Code  
97034-6153FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647442

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAGERSTEDT, FRANK, , ,**

Mailing Address 83 KETCHAM AVE

City  
AMITYVILLEState  
NYZip Code  
11701-3110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645868

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 774 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAGERSTEDT, FRANK, , ,**

Mailing Address 83 KETCHAM AVE

City  
AMITYVILLEState  
NYZip Code  
11701-3110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645874**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANEY, RONALD, , ,**

Mailing Address 531 MAPLE DR.

City  
SUMMERVILLEState  
GAZip Code  
30747-1799FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647550**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645988**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 775 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAUGTUG, LOREN, , ,**

Mailing Address 254 MAGOTHY COVE CT

City  
PASADENAState  
MDZip Code  
21122-4169FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.10

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645877**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAWRENCE, WILLIAM, , ,**

Mailing Address 3003 GRAND ELM CIRCLE

City  
HOUSTONState  
TXZip Code  
77068-2124FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647363**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAWRY, GEORDIE, , ,**

Mailing Address 21511 RUSHFORD DRIVE

City  
LAKE FORESTState  
CAZip Code  
92630-6549FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.10

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645915**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

209.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 776 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647435

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEVIS, RICHARD, E., MR.,**

Mailing Address 5225 OLD RIVER ROAD

City  
BAKERState  
FLZip Code  
32531-9302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646177

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEVIS, RICHARD, E., MR.,**

Mailing Address 5225 OLD RIVER ROAD

City  
BAKERState  
FLZip Code  
32531-9302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647044

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 777 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEVY, RICHARD, P., DR.,**

Mailing Address 2785 S MAJESTIC AVE

City  
YUMAState  
AZZip Code  
85365-1170FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOUTHWEST ONCOLOGY CENTERSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647231

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEWISSMITH, ROSALIND, , MRS.,**

Mailing Address 503 CYPRESS LINKS WAY

City  
TAYLORSState  
SCZip Code  
29687-6473FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646967

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LICATA, STEPHEN, , ,**

Mailing Address 213-19 99TH AVENUE

City  
QUEENS VILLAGEState  
NYZip Code  
11429-1134FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JLJ ENTERPRISESOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

358.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646575

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

187.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 778 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIGHT, IDA, , ,**

Mailing Address P,O.BOX 218

City  
BROAD RUNState  
VAZip Code  
20137-0218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647260

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIGHT, IDA, , ,**

Mailing Address P,O.BOX 218

City  
BROAD RUNState  
VAZip Code  
20137-0218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647263

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LIGHT, IDA, , ,**

Mailing Address P,O.BOX 218

City  
BROAD RUNState  
VAZip Code  
20137-0218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647264

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 779 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIGHT, IDA, , ,**

Mailing Address P,O.BOX 218

City  
BROAD RUNState  
VAZip Code  
20137-0218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647265

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIGHT, IDA, , ,**

Mailing Address P,O.BOX 218

City  
BROAD RUNState  
VAZip Code  
20137-0218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647266

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LIGHT, IDA, , ,**

Mailing Address P,O.BOX 218

City  
BROAD RUNState  
VAZip Code  
20137-0218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647267

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 780 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINDENBERG, LARRY, , MR.,**

Mailing Address 846 DOERFLER DR.

City  
KIMBERLYState  
WIZip Code  
54136-2304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646347

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LITTLEJOHN, AILEEN, , ,**

Mailing Address 135 LAS BORREGAS

City  
BELENState  
NMZip Code  
87002-9560FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645848

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LITZAU, JEROME, , ,**

Mailing Address 300 E N SHORE DR. APT 14

City  
HARTLANDState  
WIZip Code  
53029-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646228

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 781 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645932**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOGSDON, NORMAN , , ,**

Mailing Address 5940 HAVENS TRL

City  
TYLERState  
TXZip Code  
75707-6402FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TIDEWATER MARINEOccupation (for Individual)  
MARINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645617**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOHMAN, CAROLYN, , ,**

Mailing Address 3229 WALNUT CREEK CT

City  
BRYANState  
TXZip Code  
77807-4852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

615.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645549**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 782 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOMBARDO, MARIE, , ,**

Mailing Address 1 HAWTHORNE LANE

City  
NORWELLState  
MAZip Code  
02061-1253FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646926

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645671

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647564

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 783 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUND, JOAN, H., MRS.,**

Mailing Address 1705 SPRING CREEK RD

City  
BELVIDERE

State  
IL

Zip Code  
61008-9699

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27645606**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUTHER, ROBERT, , MR.,**

Mailing Address 2201 LAUREL OAK DRIVE

City  
VALENCIA

State  
PA

Zip Code  
16059-8776

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27646735**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LYLES, RICHARD, A., ,**

Mailing Address 27211. MILLER. STREET

City  
PORT NECHES

State  
TX

Zip Code  
77651-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27647693**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

154.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 784 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LYONS, GEORGE, , ,

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534-5242FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1658.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646151

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LYONS, GEORGE, , ,

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534-5242FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1658.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646185

Amount of Each Receipt this Period

79.20

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LYONS, GEORGE, , ,

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534-5242FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1658.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646536

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

206.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 785 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LYONS, GEORGE, , ,**

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534-5242FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1658.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646786

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACUMBER, THOMAS, , ,**

Mailing Address 443 SLATE STREET

City  
CHESAPEAKEState  
VAZip Code  
23322-1705FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647513

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647447

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 786 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647544

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTINO, BOB, , ,**

Mailing Address P.O. BOX 1101

City  
SKIPPACKState  
PAZip Code  
19474-1101FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647379

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, CLIFFORD, , ,**

Mailing Address 230 COLLEGE STREET

City  
BURLINGTONState  
VTZip Code  
05401-8352FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FLEX-A-SEALOccupation (for Individual)  
MACHINIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645978

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

173.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 787 OF 6441  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTINEZ, HUMBERTO, , ,**

Mailing Address 121 BLUEBIRD AVE

City  
MCALLENState  
TXZip Code  
78504-2214FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.07

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646887**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646165**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

832.39

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645904**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 788 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATEER, RAYMOND, , ,**

Mailing Address 1278 MATEER RD

City  
KITTANNINGState  
PAZip Code  
16201-8024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645832

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATEER, RAYMOND, , ,**

Mailing Address 1278 MATEER RD

City  
KITTANNINGState  
PAZip Code  
16201-8024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647217

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATULA, LOIS, , ,**

Mailing Address 580 FREEMAN LANE

City  
LA VERNIAState  
TXZip Code  
78121-2102FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SALES ASSOCIATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645656

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.14



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 789 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAZZARI, JUDY, , ,**

Mailing Address 904 ACACIA AVE

City  
HUNTINGTON BEACHState  
CAZip Code  
92648-4006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645774

Amount of Each Receipt this Period

30.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAZZARI, JUDY, , ,**

Mailing Address 904 ACACIA AVE

City  
HUNTINGTON BEACHState  
CAZip Code  
92648-4006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645776

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCALLISTER, IDA, , ,**

Mailing Address 5911 E WOODLAWN DR. APT 114

City  
SPOKANE VALLEYState  
WAZip Code  
99212-0364FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VAOccupation (for Individual)  
PATIENT FINANCIAL SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646465

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 790 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCALLISTER, IDA, , ,**

Mailing Address 5911 E WOODLAWN DR. APT 114

City  
SPOKANE VALLEYState  
WAZip Code  
99212-0364FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VAOccupation (for Individual)  
PATIENT FINANCIAL SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646467

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCALLISTER, IDA, , ,**

Mailing Address 5911 E WOODLAWN DR. APT 114

City  
SPOKANE VALLEYState  
WAZip Code  
99212-0364FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VAOccupation (for Individual)  
PATIENT FINANCIAL SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646470

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCANN, PETER, A., MR.,**

Mailing Address P O BOX 416

City  
GROVEPORTState  
OHZip Code  
43125-0416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
R E DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647342

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

147.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 791 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCANN, WILLIAM, R., MR., JR.**

Mailing Address 12909 EAST CASTRO STREET

City  
DEWEYState  
AZZip Code  
86327-8285FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645831**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCANN, WILLIAM, R., MR., JR.**

Mailing Address 12909 EAST CASTRO STREET

City  
DEWEYState  
AZZip Code  
86327-8285FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645846**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCANN, WILLIAM, R., MR., JR.**

Mailing Address 12909 EAST CASTRO STREET

City  
DEWEYState  
AZZip Code  
86327-8285FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

461.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645850**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.20

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 792 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCANN, WILLIAM, R., MR., JR.**

Mailing Address 12909 EAST CASTRO STREET

City  
DEWEY

State  
AZ

Zip Code  
86327-8285

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27645853**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCANN, WILLIAM, R., MR., JR.**

Mailing Address 12909 EAST CASTRO STREET

City  
DEWEY

State  
AZ

Zip Code  
86327-8285

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27645858**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCLELLAN, REBECCA, A., MS.,**

Mailing Address 12000 E. PRINCE RD.

City  
TUCSON

State  
AZ

Zip Code  
85749-9044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RAM-MAC PRODUCTS

Occupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27647206**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

239.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 793 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCRAY, GREGORY, C., MR.,**

Mailing Address 4604 YELLOW ROSE TRAIL

City  
AUSTINState  
TXZip Code  
78749-1670FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646911

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCRAY, GREGORY, C., MR.,**

Mailing Address 4604 YELLOW ROSE TRAIL

City  
AUSTINState  
TXZip Code  
78749-1670FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646913

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCFADDEN, ROYCE, , MR.,**

Mailing Address 1250 FM 168

City  
OLTONState  
TXZip Code  
79064-2118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

267.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645518

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 794 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCFADDEN, ROYCE, , MR.,**

Mailing Address 1250 FM 168

City  
OLTONState  
TXZip Code  
79064-2118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.29

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645524**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCGARRY, ANN, DOLORES, MS.,**

Mailing Address PO BOX 3518

City  
ANTHONYState  
TXZip Code  
79821-3518FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645461**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCGAVOCK, VICKI, , ,**

Mailing Address 4004 109TH ST

City  
LUBBOCKState  
TXZip Code  
79423-0880FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

618.36

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646531**

Amount of Each Receipt this Period

1.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.71

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 795 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCGREEVY, KEVIN, J., MR.,**

Mailing Address 2161 CHAIN BRIDGE RD

City  
VIENNAState  
VAZip Code  
22182-6033FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NETWORK DESIGNS INC.Occupation (for Individual)  
EXEC VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645576**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCLAUGHLIN, HELEN, , ,**

Mailing Address 2300 CHANDLERS LANE UNIT 108

City  
OLMSTED FALLSState  
OHZip Code  
44138-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.70

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647455**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCLEOD, PATTY, , ,**

Mailing Address 248 EAGLE RIDGE RD

City  
ALTOState  
NMZip Code  
88312-8017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.06

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647396**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 796 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MESSERSMITH, CHARLES, , ,**

Mailing Address 604 HATCHWOOD DR.

City  
HAINES CITYState  
FLZip Code  
33844-8208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JEHOVAHOccupation (for Individual)  
PREACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646045**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIANO, LUCILLE, , ,**

Mailing Address P.O.BOX 510315

City  
MELBOURNE BEACHState  
FLZip Code  
32951-0315FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647238**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646539**

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.60



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 797 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLS, DANIEL, , ,**

Mailing Address 369 SOUTH LAKE DRIVE

City  
PALM BEACHState  
FLZip Code  
33480-4571FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5505.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646822

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOCK, WILLIAM, , ,**

Mailing Address 923 6TH AVENUE

City  
ALBANYState  
GAZip Code  
31701-1742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645758

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOCK, WILLIAM, , ,**

Mailing Address 923 6TH AVENUE

City  
ALBANYState  
GAZip Code  
31701-1742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645761

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

546.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 798 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOCK, WILLIAM, , ,**

Mailing Address 923 6TH AVENUE

City  
ALBANYState  
GAZip Code  
31701-1742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645766

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOESLEIN, FRANK, A., MR.,**

Mailing Address 7799 HOLIDAY DR. N

City  
SARASOTAState  
FLZip Code  
34231-5311FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646025

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646938

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

171.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 799 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOODY, EVAN, E., MR.,**

Mailing Address 26 CHERRY HILLS FARM DR.

City  
ENGLEWOODState  
COZip Code  
80113-7165FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MOODY INSURANCE AGENCYOccupation (for Individual)  
INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646000

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOORMAN, FRANCES, S., MRS.,**

Mailing Address 11207 BUSHIRE DRIVE

City  
DALLASState  
TXZip Code  
75229-4106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646246

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOSSMAN , GUY, , ,**

Mailing Address 603 SEAWARD DRIVE

City  
CHARLESTONState  
SCZip Code  
29412-8941FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ORBIS INCOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

378.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646952

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 800 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUFFERI, SAMUEL, C., MR.,**

Mailing Address 6421 MILL RD

City  
EGG HARBOR TWPState  
NJZip Code  
08234-4923FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645607**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MULAR, KATHLEEN, , ,**

Mailing Address 8215 BUNTON ROAD

City  
WILLISState  
MIZip Code  
48191-9501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PARKWAY SERVICES INCOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646495**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

955.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647511**

Amount of Each Receipt this Period

0.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 801 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NIGENT, SUSAN, , ,**

Mailing Address 2445 FAWNLAKE CIRCLE

City  
KATYState  
TXZip Code  
77493-8093FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645759

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIGENT, SUSAN, , ,**

Mailing Address 2445 FAWNLAKE CIRCLE

City  
KATYState  
TXZip Code  
77493-8093FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647595

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NOYES, RITA, S., MRS.,**

Mailing Address 4070 FOUNDERS CLUB DR.

City  
SARASOTAState  
FLZip Code  
34240-1441FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646764

Amount of Each Receipt this Period

7.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

207.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 802 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OBERLENDER, JANICE, , ,**

Mailing Address 5533 PRESTWICK LANE

City  
DALLASState  
TXZip Code  
75252-4978FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

959.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646796

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OBERLENDER, JANICE, , ,**

Mailing Address 5533 PRESTWICK LANE

City  
DALLASState  
TXZip Code  
75252-4978FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

959.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646806

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OBERLENDER, JANICE, , ,**

Mailing Address 5533 PRESTWICK LANE

City  
DALLASState  
TXZip Code  
75252-4978FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

959.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646809

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

208.20

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 803 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OBERLENDER, JANICE, , ,

Mailing Address 5533 PRESTWICK LANE

City  
DALLASState  
TXZip Code  
75252-4978FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

959.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646810

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OBERLENDER, JANICE, , ,

Mailing Address 5533 PRESTWICK LANE

City  
DALLASState  
TXZip Code  
75252-4978FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

959.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646812

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OKEEFE, JAMES, , ,

Mailing Address 3636 S LELAND ST

City  
SAN PEDROState  
CAZip Code  
90731-6426FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

315.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645798

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

66.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 804 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OPDYCKE, NICOLA, , ,**

Mailing Address 2202 MIRAMONTE WAY

City  
NAPLESState  
FLZip Code  
34105-3074FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

Transaction ID : SA11A.27645711

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OWENS, ROBERT, , ,**

Mailing Address 141 ALEXANDER PLACE

City  
WINTER PARKState  
FLZip Code  
32789-4417FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMMERCIAL REAL ESTATE MANAGEMENTOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

Transaction ID : SA11A.27646208

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAPPAS, MARY, ALICE, MS.,**

Mailing Address 1617 N FLAGLER DR APT 4A

City  
WEST PALM BEACHState  
FLZip Code  
33407-6506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.64

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

Transaction ID : SA11A.27646589

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 805 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAPPAS, MARY, ALICE, MS.,**

Mailing Address 1617 N FLAGLER DR APT 4A

City  
WEST PALM BEACHState  
FLZip Code  
33407-6506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.64

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646591**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAPPAS, MARY, ALICE, MS.,**

Mailing Address 1617 N FLAGLER DR APT 4A

City  
WEST PALM BEACHState  
FLZip Code  
33407-6506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.64

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646604**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAPPAS, MARY, ALICE, MS.,**

Mailing Address 1617 N FLAGLER DR APT 4A

City  
WEST PALM BEACHState  
FLZip Code  
33407-6506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.64

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646661**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 806 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAPPAS, MARY, ALICE, MS.,**

Mailing Address 1617 N FLAGLER DR APT 4A

City  
WEST PALM BEACHState  
FLZip Code  
33407-6506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646663**

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAPPAS, MARY, ALICE, MS.,**

Mailing Address 1617 N FLAGLER DR APT 4A

City  
WEST PALM BEACHState  
FLZip Code  
33407-6506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646666**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKER, BRUCE, E., ,**

Mailing Address 320 IVYWOOD LANE

City  
NAPLESState  
FLZip Code  
34112-7239FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646253**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 807 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, EDWIN, , ,**

Mailing Address 2061 SE ACADEMY ST

City  
DALLASState  
ORZip Code  
97338-1965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647147**

Amount of Each Receipt this Period

12.79

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETERS, JOHN, C., MR., JR.**

Mailing Address 211 NORTH BOSTON AVENUE

City  
N. MASSAPEQUAState  
NYZip Code  
11758-1544FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647421**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETITJEAN, SANDRA, , ,**

Mailing Address 6832 TAMARA LANE

City  
ASSARIAState  
KSZip Code  
67416-8875FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646100**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

126.89

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 808 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETRILENA, JAMES, , ,**

Mailing Address 19 HIGHLAND DR.

City  
MC KEES ROCKSState  
PAZip Code  
15136-1731FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CARPENTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645950**

Amount of Each Receipt this Period

14.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645419**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645459**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.33

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 809 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PHILLIPS, KAREN, , ,**

Mailing Address 13888 STATE ROAD 32 EAST

City  
NOBLESVILLE

State  
IN

Zip Code  
46060-8858

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.35

Date of Receipt

**02** / **03** / **2025**

**Transaction ID : SA11A.27645741**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMS

State  
MN

Zip Code  
56686-4509

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

**02** / **03** / **2025**

**Transaction ID : SA11A.27645870**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIERCE, HAROLD, , ,**

Mailing Address 2424 CAPTAIN COOK DRIVE

City  
ANCHORAGE

State  
AK

Zip Code  
99517-1279

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**02** / **03** / **2025**

**Transaction ID : SA11A.27646201**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

17.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 810 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIZZA, JOSEPH, M., ,**

Mailing Address 50 MIDDLE ROAD

City  
PALM BEACHState  
FLZip Code  
33480-4712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHARMASPHEREOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646785

Amount of Each Receipt this Period

495.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PLUNKETT, LEE, W., DR.,**

Mailing Address 8340 KENNINGSTON WAY

City  
DULUTHState  
GAZip Code  
30097-1667FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646023

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POHL, MATTHEW, J., MR.,**

Mailing Address 5146 GLEN VERDE DR

City  
BONITAState  
CAZip Code  
91902-2626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646105

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

568.93

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 811 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PORTER, PEGGY, , ,**

Mailing Address P.O. BOX 245

City  
VINA

State  
CA

Zip Code  
96092-0245

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

**Transaction ID : SA11A.27646668**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POTEET, MARY, , ,**

Mailing Address 3636 GREENACRES PLACE DR.  
APT 43

City

BOSSIER CITY

State  
LA

Zip Code  
71111-2147

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.78

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

**Transaction ID : SA11A.27645748**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POZZI, ROBERT, J., ,**

Mailing Address 3733 FALSTONE ROAD

City

RICHMOND

State  
VA

Zip Code  
23234-3769

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.00

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

**Transaction ID : SA11A.27645534**

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

135.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 812 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRESLEY, JUANITA, , MS.,**

Mailing Address 4115 E. CLOCKTOWER LANE, APT. 246

City  
MERIDIANState  
IDZip Code  
83642-4742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.53

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647619**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRESTON, BRADLEY, B., MR.,**

Mailing Address 2109 SOMMER ST

City  
NAPAState  
CAZip Code  
94559-4306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647611**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. QUINTANA, CARLOS, , ,**

Mailing Address 2250 HAYES STREET

City  
SAN FRANCISCOState  
CAZip Code  
94117-1078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
NEUROLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647010**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.40



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 813 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RADY, PAUL, M., MR.,**

Mailing Address 4 MOCKINGBIRD LN

City  
ENGLEWOODState  
COZip Code  
80113-4813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANTERO RESOURCESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8901.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645909

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RADY, PAUL, M., MR.,**

Mailing Address 4 MOCKINGBIRD LN

City  
ENGLEWOODState  
COZip Code  
80113-4813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANTERO RESOURCESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8901.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645910

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RADY, PAUL, M., MR.,**

Mailing Address 4 MOCKINGBIRD LN

City  
ENGLEWOODState  
COZip Code  
80113-4813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANTERO RESOURCESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

8901.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645916

Amount of Each Receipt this Period

475.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

975.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 814 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RADY, PAUL, M., MR.,**

Mailing Address 4 MOCKINGBIRD LN

City  
ENGLEWOODState  
COZip Code  
80113-4813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANTERO RESOURCESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8901.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645964**

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAMEY, KEN, , ,**

Mailing Address 998 COUNTY ROAD 76

City  
ALTURASState  
CAZip Code  
96101-7777FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646459**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAVENSCROFT, ROBERT, , ,**

Mailing Address 8445 E HARTFORD DR.

City  
SCOTTSDALEState  
AZZip Code  
85255-5450FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

519.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647133**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1129.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 815 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAYMOND, MARC, , ,**

Mailing Address 205 PALMA VISTA WAY UNIT 715

City  
SAINT AUGUSTINEState  
FLZip Code  
32092-0940FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GATORS DOCKSIDEOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645560**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REAVIS, ROY, , ,**

Mailing Address 205 RUE SAINT BARTS

City  
YOUNGSVILLEState  
LAZip Code  
70592-5525FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.21

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647051**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REAVIS, ROY, , ,**

Mailing Address 205 RUE SAINT BARTS

City  
YOUNGSVILLEState  
LAZip Code  
70592-5525FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

430.21

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647053**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 816 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** REAVIS, ROY, , ,

Mailing Address 205 RUE SAINT BARTS

City  
YOUNGSVILLEState  
LAZip Code  
70592-5525FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647057

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** REAVIS, ROY, , ,

Mailing Address 205 RUE SAINT BARTS

City  
YOUNGSVILLEState  
LAZip Code  
70592-5525FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647060

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** REAVIS, ROY, , ,

Mailing Address 205 RUE SAINT BARTS

City  
YOUNGSVILLEState  
LAZip Code  
70592-5525FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

430.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647061

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 817 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REYES, RAYMOND, , ,**

Mailing Address 11724 S.MAGOUN DR.

City  
ST.JOHNState  
INZip Code  
46373-9275FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FORD MOTOR CORP.Occupation (for Individual)  
ELECTRICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647617**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REYNOLDS, ED, , ,**

Mailing Address PO BOX 539

City  
TAZEWELLState  
VAZip Code  
24651-0539FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
POWER TRACOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.75

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646909**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645694**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 818 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645698

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645701

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645703

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

9.06

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 819 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RIEDINGER, EVA, , ,

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645704

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RIEDINGER, EVA, , ,

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645707

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RITCHEY, GREG, , ,

Mailing Address 5333 53 STREET N

City  
SAINT PETERSBURGState  
FLZip Code  
33709-3735FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPSOccupation (for Individual)  
LETTER CARRIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646433

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 820 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, DALE, , ,**

Mailing Address 104 BRANNON LANE

City  
TROYState  
ALZip Code  
36079-8203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645494

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, DALE, , ,**

Mailing Address 104 BRANNON LANE

City  
TROYState  
ALZip Code  
36079-8203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647613

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, JAMES, , ,**

Mailing Address 2034 MOFFITT CREEK RD

City  
BLACKSTOCKState  
SCZip Code  
29014-8845FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647669

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.47



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 821 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGO

State  
CA

Zip Code  
92130-2456

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

**Transaction ID : SA11A.27646374**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROHOSKY, ROBERT, , ,**

Mailing Address 3739 HONEYCOMB DR

City  
CONYERS

State  
GA

Zip Code  
30094-3662

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.40

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

**Transaction ID : SA11A.27647119**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROHRIG, SHELLEY, J., ,**

Mailing Address 49 MASER AVENUE

City  
WHEELING

State  
WV

Zip Code  
26003-7246

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

241.80

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

**Transaction ID : SA11A.27647112**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

140.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 822 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646084

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647116

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647253

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 823 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647638

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647640

Amount of Each Receipt this Period

1.96

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUDDY, HOLLY, , ,**

Mailing Address 11700 RIDGETOP DR.

City  
SHERWOODState  
ARZip Code  
72120-3990FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647632

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 824 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUGGIERI, THOMAS, , MR.,**

Mailing Address 115 HAWTHORNE LN

City  
PHOENIXVILLEState  
PAZip Code  
19460-2731FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647071

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RYAN, KEVIN, M., MR.,**

Mailing Address 317 SIDLEY ROAD

City  
MALVERNState  
PAZip Code  
19355-1132FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645540

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RYBERG, JANICE, , MS.,**

Mailing Address 480 E CLARK AVE

City  
SANTA MARIAState  
CAZip Code  
93455-4835FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

394.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645547

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

118.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 825 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RYBERG, JANICE, , MS.,**

Mailing Address 480 E CLARK AVE

City  
SANTA MARIAState  
CAZip Code  
93455-4835FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645944

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RYDZESKI, TOM, , ,**

Mailing Address 22562 MARYLHURST CT

City  
LAKE FORESTState  
CAZip Code  
92630-5033FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647428

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHIPPER, GERRIT, , ,**

Mailing Address 2344 DIXON RD

City  
FREDERICKState  
MDZip Code  
21704-8131FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CWCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646379

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

136.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 826 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHUNK, LEE, , ,**

Mailing Address 5503 S. CORNWELL AVE

City  
CLAREState  
MIZip Code  
48617-9743FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646953

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCKITONE, CARMELO, , MR.,**

Mailing Address 4415 AVENUE L

City  
SANTA FEState  
TXZip Code  
77510-8646FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645682

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645501

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 827 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATIN

State  
OR

Zip Code  
97062-9528

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27645502**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATIN

State  
OR

Zip Code  
97062-9528

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27645504**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATIN

State  
OR

Zip Code  
97062-9528

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27645505**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 828 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645506

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645507

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646145

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 829 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646146

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646148

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646149

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.98

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 830 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATIN

State  
OR

Zip Code  
97062-9528

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27646150**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATIN

State  
OR

Zip Code  
97062-9528

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27646152**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATIN

State  
OR

Zip Code  
97062-9528

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27646156**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

38.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 831 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEMPLE, FRANK, , ,**

Mailing Address 22211 N 32ND ST

City  
PHOENIXState  
AZZip Code  
85050-8426FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647223

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEPHTON, GAYLE, , ,**

Mailing Address 150E LAKESHORE DR. #72

City  
LAKE ELSINOREState  
CAZip Code  
92530-4241FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646643

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEPHTON, GAYLE, , ,**

Mailing Address 150E LAKESHORE DR. #72

City  
LAKE ELSINOREState  
CAZip Code  
92530-4241FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646654

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

134.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 832 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEPHTON, GAYLE, , ,**

Mailing Address 150E LAKESHORE DR. #72

City  
LAKE ELSINOREState  
CAZip Code  
92530-4241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646657**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SERRATO, MARCELLO, W., MR.,**

Mailing Address 4250 SAINT CHARLES WAY

City  
BOCA RATONState  
FLZip Code  
33434-5359FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PRESTIGE AUTOOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646191**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SESSIONS, ROXANNE, , ,**

Mailing Address 8592CREEKWAY

City  
ALANSONState  
MIZip Code  
49706-8516FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.18

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646722**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 833 OF 6441  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEXTON, STEPHEN, M., MR.,**

Mailing Address 2728 IRON CT

City  
FREMONTState  
NEZip Code  
68025-6167FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.28

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646356**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEXTON, STEPHEN, M., MR.,**

Mailing Address 2728 IRON CT

City  
FREMONTState  
NEZip Code  
68025-6167FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.28

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646363**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHAUGHNESSY, KATHLEEN, , ,**

Mailing Address 182 BURNT HICKORY WAY

City  
FORTSONState  
GAZip Code  
31808-4468FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

508.87

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646793**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 834 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHAYS, LORRAINE, , ,**

Mailing Address 14659 CANALVIEW DRIVE APT A

City  
DELRAY BEACHState  
FLZip Code  
33484-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647454**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHRINER, ROBERT, , ,**

Mailing Address 519 MIAMI CLUB CT

City  
MISHAWAKAState  
INZip Code  
46544-2675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1435.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646237**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHUGER, JILL, , ,**

Mailing Address N7756 BUSHEY RD

City  
TREGOState  
WIZip Code  
54888-9327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646864**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 835 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHUTT, MARILYN, , ,**

Mailing Address 614 COUNTY ROAD 312

City  
EDNAState  
TXZip Code  
77957-0320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647682

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIEWERT, CHARLES, R., ,**

Mailing Address 6067 HOGAN DR N

City  
KEIZERState  
ORZip Code  
97303-7445FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.04

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646931

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, KELLY, , ,**

Mailing Address 5800 GRASSMERE LANE

City  
DALLASState  
TXZip Code  
75205-4624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.98

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646697

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 836 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647032**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLEANICOV, PAVEL, A., MR.,**

Mailing Address 711 MEADOW CREST DRIVE

City  
ROCKTONState  
ILZip Code  
61072-8000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.52

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646048**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647327**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.35



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 837 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647328**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647329**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647331**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 838 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647332

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647333

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647481

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

79.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 839 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPEH, SHIRLEY, , ,**

Mailing Address 6799 DRAGONFLY LANE SW

City  
ALBUQUERQUEState  
NMZip Code  
87105-4078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646027

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPONHOLZ, RICHARD, , ,**

Mailing Address 358 FRANKLIN ST

City  
SAN MATEOState  
CAZip Code  
94402-2214FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645997

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646350

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

246.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 840 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUND

State  
GA

Zip Code  
30107-2716

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27646355**

Amount of Each Receipt this Period

1.27

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUND

State  
GA

Zip Code  
30107-2716

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27647270**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEIGER, JEANNE, , MS.,**

Mailing Address 877NEVADA. WYNFORD

City  
BUCYRUS

State  
OH

Zip Code  
44820-9440

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

**Transaction ID : SA11A.27646573**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

9.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 841 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEPP, WILLIAM, , ,**

Mailing Address 1205 LAKE CLARKE DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33406-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647076

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEUART, BRADLEY, W., MR.,**

Mailing Address 991 DEBORAH CIR

City  
BOUNTIFULState  
UTZip Code  
84010-2324FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
A G L LOccupation (for Individual)  
LIBRARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645881

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOUT, GREGORY, , ,**

Mailing Address 1747 TOMMY AARON DR

City  
EL PASOState  
TXZip Code  
79936-4621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

392.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645842

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

162.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 842 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STREET, PATRICIA, , ,**

Mailing Address 3804 AURORA CT.

City  
HALTOM CITYState  
TXZip Code  
76117-2708FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646026

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STREET, PATRICIA, , ,**

Mailing Address 3804 AURORA CT.

City  
HALTOM CITYState  
TXZip Code  
76117-2708FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646031

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STREET, PATRICIA, , ,**

Mailing Address 3804 AURORA CT.

City  
HALTOM CITYState  
TXZip Code  
76117-2708FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647594

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 843 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUHR, J., NICHOLAS, MR.,**

Mailing Address 2006 YELLOWSTONE DR

City  
INDIAN LANDState  
SCZip Code  
29707-3536FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647541**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SYLVESTRI, RONALD, J., MR.,**

Mailing Address 333 WEST STREET # 5

City  
DARIENState  
CTZip Code  
06820-4038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647568**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SZALOCZI, IRENE, , ,**

Mailing Address 27 GRACE ST

City  
FORDSState  
NJZip Code  
08863-2101FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

279.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647141**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 844 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TALBOT, DOUGLAS, , ,**

Mailing Address 4548 SOUTH 785 EAST

City  
MILLCREEKState  
UTZip Code  
84107-4128FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.25

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646097**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULAState  
MTZip Code  
59804-5849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.60

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646818**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THATCHER, PATRICIA, , ,**

Mailing Address 318 ROSEMARY ST

City  
SMYRNAState  
TNZip Code  
37167-5257FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

324.34

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646184**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.04



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 845 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THATCHER, PATRICIA, , ,**

Mailing Address 318 ROSEMARY ST

City  
SMYRNAState  
TNZip Code  
37167-5257FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646189**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMA, BARBARA, , ,**

Mailing Address 47 CORDOBA POINT

City  
SUNRISE BEACHState  
MOZip Code  
65079-5810FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646788**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, LYNN, , ,**

Mailing Address 7124 E CRESCENTRIDGE DR.

City  
SPRINGFIELDState  
MOZip Code  
65809-3251FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THOMPSON SALESOccupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5205.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645469**

Amount of Each Receipt this Period

5205.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5257.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 846 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THORPE, DEAN, , ,**

Mailing Address PO BOX 1528

City  
GOLDTHWAITEState  
TXZip Code  
76844-1528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646718

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TOBEN, DENNIS, , ,**

Mailing Address 19501 40TH AVENUE WEST #545

City  
LYNNWOODState  
WAZip Code  
98036-5799FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27647458

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TONNESEN, ALAN, , ,**

Mailing Address 38 CONKLIN ROAD

City  
WARWICKState  
NYZip Code  
10990-3911FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PASSPORT CORPORATIONOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

342.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645977

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 847 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TUCKER, BRYAN, , MR.,**

Mailing Address P.O. BOX 84519

City  
PEARLANDState  
TXZip Code  
77584-0011FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ONLINE DIRECTIONALOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646262**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TUMLINSON, JUDY, , ,**

Mailing Address 5946 EAST BRIARWOOD CIRCLE

City  
CENTENNIALState  
COZip Code  
80112-1022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646183**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TUMLINSON, RICHARD, , ,**

Mailing Address P.O. BOX 3817

City  
ENGLEWOODState  
COZip Code  
80155-3817FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647467**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 848 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TUNALI, ANN, , ,**

Mailing Address 7511 AUDEN TRAIL

City  
ATLANTAState  
GAZip Code  
30350-5002FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646114**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TUNALI, ANN, , ,**

Mailing Address 7511 AUDEN TRAIL

City  
ATLANTAState  
GAZip Code  
30350-5002FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646117**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VANDERHELM, GORDON, , ,**

Mailing Address 3771 E TEAL COVE CT

City  
HERNANDOState  
FLZip Code  
34442-5590FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647107**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

97.86

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 849 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VANDYKE, BOBBIE, J., ,**

Mailing Address 201 ELLIOTT ROAD

City  
MARY ESTHER

State  
FL

Zip Code  
32569-1655

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.07

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

**Transaction ID : SA11A.27645718**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VANDYKE, BOBBIE, J., ,**

Mailing Address 201 ELLIOTT ROAD

City  
MARY ESTHER

State  
FL

Zip Code  
32569-1655

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.07

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

**Transaction ID : SA11A.27645719**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VANDYKE, BOBBIE, J., ,**

Mailing Address 201 ELLIOTT ROAD

City  
MARY ESTHER

State  
FL

Zip Code  
32569-1655

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.07

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025

**Transaction ID : SA11A.27645722**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 850 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VO, HONG, , ,

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645471

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VO, HONG, , ,

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646290

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VO, HONG, , ,

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646567

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 851 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647121**

Amount of Each Receipt this Period

7.77

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VOLK, BEVERLY, , ,**

Mailing Address 1511 RED MAPLE LANE

City  
ALLENTOWNState  
PAZip Code  
18104-2011FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646370**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WADDELL, JENETTA, , ,**

Mailing Address PO BOX 215

City  
TUSCUMBIAState  
ALZip Code  
35674-0215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BLUE MOUNTAIN CHRISTIAN UNIVERSITYOccupation (for Individual)  
DEAN, SCHOOL OF EDUCATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

643.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647256**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 852 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WAGNER, CHARLES, , MR.,**

Mailing Address 5 GEDNEY ESPLANADE

City  
WHITE PLAINSState  
NYZip Code  
10605-3512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHARLES ELWYN CORPOccupation (for Individual)  
PROPERTY MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646807**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WAGNER, HEIDI, , ,**

Mailing Address 3377 W 114TH CIRCLE D

City  
WESTMINSTERState  
COZip Code  
80031-7125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645498**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WANDEL, JOAN, C., MS.,**

Mailing Address 249 CARAVAN CIR

City  
NORTH FORT MYERSState  
FLZip Code  
33903-7321FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE OF MISSOURIOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

346.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645888**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

391.69



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 853 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WARD, ARTHUR, N., ,**

Mailing Address 4005 NE 160TH ST

City  
LAKE FOREST PARKState  
WAZip Code  
98155-6731FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.68

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646018**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WARFIELD, DONNA, , ,**

Mailing Address 29 DOWNSHIRE LANE

City  
DECATURState  
GAZip Code  
30033-1415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.09

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646959**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRISTOL MYERS SQUIBBOccupation (for Individual)  
COMPETITIVE INTELLIGENCE STRAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.41

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646269**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 854 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATT, CAROL, , ,**

Mailing Address 1470 RHODE ISLAND ST.

City  
LOVELANDState  
COZip Code  
80538-6831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.28

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647483**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESNER, EDWARD, , ,**

Mailing Address 16717E 920 RD

City  
REYDONState  
OKZip Code  
73660-5091FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER528148

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.93

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646141**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIDJAJA, RATNA, , ,**

Mailing Address 1550 FRONTERA WAY APT 210

City  
MILLBRAEState  
CAZip Code  
94030-2804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.00

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647041**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 855 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, BETTY, , ,**

Mailing Address 311 HARPER LOOP

City  
GRANTS PASSState  
ORZip Code  
97527-5339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646310

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, CLARK, , ,**

Mailing Address 4532 GOLF RIDGE DRIVE

City  
ELKTONState  
FLZip Code  
32033-4010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27645455

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMS, CLARK, , ,**

Mailing Address 4532 GOLF RIDGE DRIVE

City  
ELKTONState  
FLZip Code  
32033-4010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA11A.27646107

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 856 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMSON, NANCY, , ,**

Mailing Address 19024 HORNSBY LANE

City  
SPICEWOODState  
TXZip Code  
78669-6955FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646462**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, AUDREY, , ,**

Mailing Address 5216 N MALLORCA WAY

City  
MERIDIANState  
IDZip Code  
83646-7473FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647374**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, CHEQUITA, , ,**

Mailing Address 222BENSON ROAD

City  
GARDENDALEState  
ALZip Code  
35071-3851FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647180**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.71

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 857 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, CHEQUITA, , ,**

Mailing Address 222BENSON ROAD

City  
GARDENDALEState  
ALZip Code  
35071-3851FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.88

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27647400**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOLF, WALTER, W., MR.,**

Mailing Address 1813 VIEWCREST LANE

City  
SPOKANE VALLEYState  
WAZip Code  
99212-3216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27646004**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOOD, CRAIG, , ,**

Mailing Address 87-215 MAMOALII WAY

City  
WAIANAEState  
HIZip Code  
96792-3219FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.98

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2025**Transaction ID : SA11A.27645548**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 858 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOOD, DARLENE, , ,**

Mailing Address 38207 N ARMADILLO DR, LAREDO RANCH

City  
SAN TAN VALLEYState  
AZZip Code  
85140-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

852.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646728**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODWARD, ALYCE, , ,**

Mailing Address 1272 WEBB RD

City  
LEWISBURGState  
TNZip Code  
37091-6833FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646542**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, JAMES, , MR.,**

Mailing Address 410 TERRACE TRAIL E

City  
LAKE QUIVIRAState  
KSZip Code  
66217-8505FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646064**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

376.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 859 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27645855**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27646642**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11A.27647079**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 860 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZAPERACH, TERRY, , ,**

Mailing Address 746 LANTANA ST.

City  
COCOAState  
FLZip Code  
32926-5246FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

**Transaction ID : SA11A.27646272**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

**Transaction ID : SA11C.27648093**

Amount of Each Receipt this Period

67001.61

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AINE, HARRY, , ,**

Mailing Address 930 TAHOE BOULEVARD

City  
INCLINE VILLAGEState  
NVZip Code  
89451-9451FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

**Transaction ID : SA11A.27648842**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 861 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649008**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650093**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMSTUTZ, SHERYL, , ,**Mailing Address 1307 S WATER ST  
UNIT 90City  
SILVERTONState  
ORZip Code  
97381-2471FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

866.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648196**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 862 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648917

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CYNIE, , ,**

Mailing Address 55 RODEO AVENUE # 5

City  
SAUSALITOState  
CAZip Code  
94965-1738FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650134

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, DANA, K., MR.,**Mailing Address 947 NEW HAMPSHIRE ST  
STE 203City  
LAWRENCEState  
KSZip Code  
66044-3074FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MACERICHOccupation (for Individual)  
REAL ESTATE INVESTMENT TRUST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

522.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649512

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 863 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANSARI, AMIR, H., MR.,**

Mailing Address 1981 PARK CHASE LN NE

City  
ATLANTAState  
GAZip Code  
30324-2738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.22

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649288**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ASBJORNSON, NORMAN, H., MR.,**

Mailing Address 2202 S TROOST AVE.

City  
TULSAState  
OKZip Code  
74114-1320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649140**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ASBJORNSON, NORMAN, H., MR.,**

Mailing Address 2202 S TROOST AVE.

City  
TULSAState  
OKZip Code  
74114-1320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649236**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

210.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 864 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ATWATET, DAVID, , ,**

Mailing Address 5829 SAINT ANDREWS DRIVE

City  
STOCKTONState  
CAZip Code  
95219-1930FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VAN DE POL ENTOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648434**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAKER, ROBERT, , ,**

Mailing Address 927 MAIN STREET

City  
RAYLANDState  
OHZip Code  
43943-6868FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649348**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAMERT, TOM, , ,**

Mailing Address BOX 336

City  
IONEState  
CAZip Code  
95640-0336FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1402.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648295**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

255.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 865 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARNES, PAUL, , ,**

Mailing Address 338 SUNSHINE WAY

City  
TURLOCKState  
CAZip Code  
95382-7373FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648817

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAYLESS, CHERYL, , ,**

Mailing Address P.O. BOX 380

City  
RIDGWAYState  
COZip Code  
81432-0380FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648455

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEALS, JOSEPH, M., MR.,**

Mailing Address 45 RENAUD RD

City  
GROSSE POINTE SHORState  
MIZip Code  
48236-1741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ST. CLAIR SPECIALTY PHYSICIANSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649231

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 866 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEAVERS, BRIAN, , ,**

Mailing Address 5 MCKINLEY AVENUE

City  
DERBYState  
CTZip Code  
06418-2415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648780

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BELLAH, ERIN, , ,**

Mailing Address 8 BILTMORE ESTATE

City  
PHOENIXState  
AZZip Code  
85016-2810FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648128

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BENSON, PATTI, , ,**

Mailing Address PO BOX 158

City  
EUREKAState  
NVZip Code  
89316-0158FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649404

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

96.71

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 867 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERRY, JOHN, , ,**

Mailing Address 2144 SOUTHAMPTON LN

City  
AVONState  
OHZip Code  
44011-1664FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649060**

Amount of Each Receipt this Period

175.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERTAGNOLE, KARL, , ,**

Mailing Address BOX 68

City  
WRIGHTState  
WYZip Code  
82732-0068FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TRUTECHOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649234**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BESINGER, RICHARD, , ,**

Mailing Address 3700 SARATOGA AVENUE

City  
DOWNERS GROVEState  
ILZip Code  
60515-1443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOYOLA UNIVERSITY HEALTH SYSTEOccupation (for Individual)  
ACADEMIC PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648736**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 868 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648330

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648389

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEULIGMANN, STEVEN, , DR.,**

Mailing Address 2311 DANA COURT

City  
CARLSBADState  
CAZip Code  
92008-2076FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEVEN BEULIGMANNOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649681

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

307.50



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 869 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BINGHAM, GLENN, S., MR.,**

Mailing Address 721 STEWARTS RD

City  
LANEXAState  
VAZip Code  
23089-8804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648874

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BINGHAM, GLENN, S., MR.,**

Mailing Address 721 STEWARTS RD

City  
LANEXAState  
VAZip Code  
23089-8804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650067

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BIRD, PHILIP, , ,**

Mailing Address 700 CABELLA COURT

City  
NORMANState  
OKZip Code  
73072-9501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

246.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649873

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

21.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 870 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BISHOP, DANNY, , ,**

Mailing Address 2050 W LAKE HAMILTON DR.

City  
WINTER HAVENState  
FLZip Code  
33881-9284FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648512**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLACK, TIMOTHY, , ,**

Mailing Address 9811 198TH AVENUE CT. E

City  
BONNEY LAKEState  
WAZip Code  
98391-5951FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DHSOccupation (for Individual)  
LEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648222**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLAUVELT, REGINALD, , ,**

Mailing Address PO BOX 832

City  
LAKE WALESState  
FLZip Code  
33859-0832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

302.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648468**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

197.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 871 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLOSSMAN, ALFRED, R., MR., JR.**

Mailing Address 16 BLOSSMAN LN.

City  
COVINGTONState  
LAZip Code  
70433-4707FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27650111

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLUHM, JAMES, E., MR.,**

Mailing Address 16376 SE 89TH TERRACE

City  
SUMMERFIELDState  
FLZip Code  
34491-5804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.80

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27649949

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLUHM, JAMES, E., MR.,**

Mailing Address 16376 SE 89TH TERRACE

City  
SUMMERFIELDState  
FLZip Code  
34491-5804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

424.80

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27650089

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 872 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BODAK, LOUISE, , ,**

Mailing Address 2087 W JESTER WAY

City  
POST FALLSState  
IDZip Code  
83854-8191FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649571**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BODAK, LOUISE, , ,**

Mailing Address 2087 W JESTER WAY

City  
POST FALLSState  
IDZip Code  
83854-8191FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649687**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOLSTER, STEPHEN, , ,**

Mailing Address P.O. BOX 25926

City  
YUMAState  
AZZip Code  
85367-1342FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

381.15

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648709**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 873 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOLSTER, STEPHEN, , ,**

Mailing Address P.O. BOX 25926

City  
YUMAState  
AZZip Code  
85367-1342FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.15

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648713**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOLSTER, STEPHEN, , ,**

Mailing Address P.O. BOX 25926

City  
YUMAState  
AZZip Code  
85367-1342FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.15

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648716**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOLSTER, STEPHEN, , ,**

Mailing Address P.O. BOX 25926

City  
YUMAState  
AZZip Code  
85367-1342FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

381.15

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648721**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 874 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOLSTER, STEPHEN, , ,**

Mailing Address P.O. BOX 25926

City  
YUMAState  
AZZip Code  
85367-1342FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648722**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOLSTER, STEPHEN, , ,**

Mailing Address P.O. BOX 25926

City  
YUMAState  
AZZip Code  
85367-1342FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648723**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOU, SOKHOEUN, , ,**

Mailing Address 12 WOODBRIDGE MANOR ROAD

City  
ANSONIAState  
CTZip Code  
06401-2626FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MEDTRONICOccupation (for Individual)  
TECH III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

417.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649987**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 875 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMASState  
ORZip Code  
97015-8629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

**Transaction ID : SA11A.27648770**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYNTON, LINDA, A., ,**

Mailing Address 15877 FOUR CORNER RD

City  
PRAIRIE GROVEState  
ARZip Code  
72753-9244FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

**Transaction ID : SA11A.27648644**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRICKING, ANGELA, , ,**

Mailing Address 5470 LEUMAS RD.

City  
CINCINNATIState  
OHZip Code  
45239-7621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

496.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

**Transaction ID : SA11A.27649841**

Amount of Each Receipt this Period

158.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 876 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649880

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, DAN, , ,**

Mailing Address 19410 99TH STREET CT E

City  
BONNEY LAKEState  
WAZip Code  
98391-5955FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648846

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, DAN, , ,**

Mailing Address 19410 99TH STREET CT E

City  
BONNEY LAKEState  
WAZip Code  
98391-5955FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649397

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 877 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648892**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648895**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, NELON, T., MR.,**

Mailing Address 14324 N 800 E

City  
ODONState  
INZip Code  
47562-5303FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.70

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649096**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

65.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 878 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITYState  
NJZip Code  
08226-2367FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648260

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURNEY, THOMAS, R., MR.,**

Mailing Address 5162 BELMEZ

City  
LAGUNA WOODSState  
CAZip Code  
92637-1810FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649807

Amount of Each Receipt this Period

52.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURR, LAWRENCE, , MR.,**

Mailing Address 31065 CASTLE RIDGE DRIVE

City  
BROOKSVILLEState  
FLZip Code  
34602-7529FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649002

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 879 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURR, LAWRENCE, , MR.,**

Mailing Address 31065 CASTLE RIDGE DRIVE

City  
BROOKSVILLEState  
FLZip Code  
34602-7529FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649037

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURT, JAN, , ,**

Mailing Address 5108 W.BATH RD

City  
AKRONState  
OHZip Code  
44333-1010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648099

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUSBY, CHARLOTTE, , ,**

Mailing Address 5110 BEECH ST

City  
BELLAIREState  
TXZip Code  
77401-3327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1628.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648336

Amount of Each Receipt this Period

44.18

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

178.18

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 880 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUSTARD, ANN, , ,**

Mailing Address 4512 GREENVIEW RD.

City  
TRENT WOODSState  
NCZip Code  
28562-7634FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649300

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CALLAHAN, DOROTHY, , ,**

Mailing Address 6704 LAKE INVERNESS CT

City  
ROGERSState  
ARZip Code  
72758-8975FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648341

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CARA, , ,**

Mailing Address 804 ROSEBERRY RD

City  
CARLISLEState  
KYZip Code  
40311-9653FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649811

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

198.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 881 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CANNON, MARGARET, , ,**

Mailing Address 3211 BARONESS CT

City  
PLANT CITYState  
FLZip Code  
33565-5603FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.66

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649262**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648267**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649765**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 882 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARSTENSEN, DENNIS, , ,**

Mailing Address 1107 PERSHING BLVD

City  
CLINTONState  
IAZip Code  
52732-5207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.12

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648161**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648309**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648337**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 883 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHILSON, RODNEY, , ,**

Mailing Address 5638 TISH CIRCLE

City  
OLIVEHURSTState  
CAZip Code  
95961-6740FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649263**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHRISTIE, ADRIAN, , ,**Mailing Address 111 ELM ST  
APT 114City  
BIRMINGHAMState  
MIZip Code  
48009-6342FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ADRIAN JOSEPH CHRISTIE, M.D.Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649038**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHRISTIE, JOHN, , ,**

Mailing Address 1575 HERITAGE DR, STE 107

City  
MCKINNEYState  
TXZip Code  
75069-3395FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

698.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649649**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

254.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 884 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLANCY, DAVID, D., MR.,**

Mailing Address 2814 SYLHOWE RD

City  
OAKLANDState  
CAZip Code  
94602-3566FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650094

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLANCY, DAVID, D., MR.,**

Mailing Address 2814 SYLHOWE RD

City  
OAKLANDState  
CAZip Code  
94602-3566FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650095

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLANCY, DAVID, D., MR.,**

Mailing Address 2814 SYLHOWE RD

City  
OAKLANDState  
CAZip Code  
94602-3566FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650097

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

48.74



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 885 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLANCY, DAVID, D., MR.,**

Mailing Address 2814 SYLHOWE RD

City  
OAKLANDState  
CAZip Code  
94602-3566FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650099**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLAPP, WILLIAM, , MR.,**

Mailing Address 1115 COPPER MOON LANE

City  
NORTH LAS VEGASState  
NVZip Code  
89031-1910FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649515**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLARK, JERALD, L., MR.,**

Mailing Address 3530 T STREET NW

City  
WASHINGTONState  
DCZip Code  
20007-2217FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CLARK ASSOCIATES ARCHITECTSOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649259**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

177.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 886 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLARKSON, WALTER, , ,**

Mailing Address 2079 SUJA LANE

City  
COPPERAS COVEState  
TXZip Code  
76522-6121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649113

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLAUNCH, STEPHEN, , ,**

Mailing Address 4414 LIME AVE

City  
LONG BEACHState  
CAZip Code  
90807-2817FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649116

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COFFARO, MARILYN, , ,**Mailing Address 10460 PROGRESS WAY  
RM 803City  
HARRISONState  
OHZip Code  
45030-0030FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648551

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

385.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 887 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COFFMAN, GREG, , ,**

Mailing Address 121 GOLD DUST TRAIL

City  
ALLENState  
TXZip Code  
75002-8469FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649245

Amount of Each Receipt this Period

217.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COHEN, ALBERT, , ,**

Mailing Address 960 SEASAGE DR.

City  
DELRAY BEACHState  
FLZip Code  
33483-6628FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DELRAY HOSPITALOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1395.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648889

Amount of Each Receipt this Period

380.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINS, CAROLE, , ,**

Mailing Address 5715 IVES PL.

City  
RIVERSIDEState  
CAZip Code  
92506-3541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

574.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649221

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

632.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 888 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648293

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648296

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648297

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 889 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648298

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648300

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648303

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

18.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 890 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648304

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648307

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONSTANTINE, RUSSELL, , ,**

Mailing Address 209 ROBIN HOOD DR

City  
COVINGTONState  
LAZip Code  
70433-4762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649400

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 891 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONUI, MADELEINE, O., MISS,**Mailing Address 620 SAND HILL RD.  
APT 105FCity  
PALO ALTOState  
CAZip Code  
94304-2614FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648720**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COOMBES, JIM, , MR.,**Mailing Address 7031 BEACH DR. SW  
APT DCity  
SEATTLEState  
WAZip Code  
98136-2095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CONSTRUCTION PLANNING AND M.Occupation (for Individual)  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649898**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COULTER, DON, A., ,**

Mailing Address 2122 OLD FOUNDRY RD

City  
WEATHERFORDState  
TXZip Code  
76087-2107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649462**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 892 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COWHEY, DENNIS, , ,**

Mailing Address 11861 MISTY ARBOR RUN

City  
FORT MYERSState  
FLZip Code  
33913-9417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649513**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. D'OLIVE, JOE, , MR.,**

Mailing Address 6136 HALEY LN

City  
FORT WORTHState  
TXZip Code  
76132-3875FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649035**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEGRISSELLES, JANET, , ,**

Mailing Address 14638 SAGAMORE COURT

City  
FORT MYERSState  
FLZip Code  
33908-4912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

426.70

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648912**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 893 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DIBARTOLOMEO, BETTY, M., MS.,

Mailing Address 135 OAKMONT CIR.

City  
PINEHURSTState  
NCZip Code  
28374-8342FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649868

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DOKKEN, KENNETH, , ,

Mailing Address 12513 44TH DRIVE SOUTHEAST

City  
EVERETTState  
WAZip Code  
98208-9003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648146

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DOKKEN, KENNETH, , ,

Mailing Address 12513 44TH DRIVE SOUTHEAST

City  
EVERETTState  
WAZip Code  
98208-9003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648148

Amount of Each Receipt this Period

7.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

47.92

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 894 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DOKKEN, KENNETH, , ,

Mailing Address 12513 44TH DRIVE SOUTHEAST

City  
EVERETTState  
WAZip Code  
98208-9003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2025

Transaction ID : SA11A.27648152

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DOREN, HARVEY, F., MR.,

Mailing Address 123 WASHINGTON ST

City  
DEDHAMState  
MAZip Code  
02026-2031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2025

Transaction ID : SA11A.27649865

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DOVER, BRENDA, , ,

Mailing Address 28656 DEER RUN ST

City  
MONTGOMERYState  
TXZip Code  
77356-3990FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOVER INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

747.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2025

Transaction ID : SA11A.27648349

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

144.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 895 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUBOIS, TRA, , ,**

Mailing Address 107 S. DEER CREEK DR. W.

City  
LELANDState  
MSZip Code  
38756-3126FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WORLD CLASS ATHLETICSURFACE INCOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648133**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNCAN, LAUREL, , ,**

Mailing Address 14532 W. CENTER DR.

City  
LAKEWOODState  
COZip Code  
80228-2338FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648915**

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNCAN, POLA, , ,**

Mailing Address 2724 E EAGLE VIEW STREET

City  
MERIDIANState  
IDZip Code  
83646-7622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649697**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

408.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 896 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EDWARDS, DALE, , MR.,**

Mailing Address 124 SE SANDSTONE DR.

City  
BLUE SPRINGSState  
MOZip Code  
64014-3812FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27650011**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSONState  
MDZip Code  
21204-4701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649146**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSONState  
MDZip Code  
21204-4701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649474**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

207.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 897 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELLIS, THOMAS, , ,**

Mailing Address 12340 LAKE FOREST DR.

City  
AZLEState  
TXZip Code  
76020-5618FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FWBSIOccupation (for Individual)  
NEUROSURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650233

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENGLEBY, THOMAS, , MR.,**

Mailing Address 1110 S PEAK VIEW DR

City

CASTLE ROCK

State

CO

Zip Code

80109-9525

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1142.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649484

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ESTIVALKREPLEY, MARIA, , ,**

Mailing Address 1901 PARK FOREST BLVD

City

MOUNT DORA

State

FL

Zip Code

32757-6929

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650052

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

626.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 898 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FARRILL, CRAIG, , MR.,**

Mailing Address 162 POLK ROAD 89

City  
MENAState  
ARZip Code  
71953-8940FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VIZIV TECHNOLOGIESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649142**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City

NORTHFIELD

State

OH

Zip Code

44067-1604

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649482**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City

NORTHFIELD

State

OH

Zip Code

44067-1604

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649493**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

126.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 899 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649495

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649497

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649500

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 900 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISH, LORNA, M., MRS.,**

Mailing Address 3 W PICKERING BND

City  
RICHBOROState  
PAZip Code  
18954-1540FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649601

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FITZGERALD, JOANNE, , ,**

Mailing Address P. O. BOX 3781

City  
COTTONWOODState  
AZZip Code  
86326-2606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICAN AIRLINESOccupation (for Individual)  
FLIGHT ATTENDANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648189

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLEMING, NORMA, , ,**

Mailing Address 414 NW KNIGHTS AVE., #613

City  
LAKE CITYState  
FLZip Code  
32055-7247FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649793

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.47



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 901 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORTNER, EDWARD, , ,**

Mailing Address 13477 AURORA DRIVE

City  
SAN LEANDROState  
CAZip Code  
94577-4032FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648123**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FORTUNATO, VINCENT, , ,**

Mailing Address 5444 YAEGER COURT

City  
SAINT LOUISState  
MOZip Code  
63129-3067FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PREMIER MEDICAL PHYSICIANSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648597**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648520**

Amount of Each Receipt this Period

7.29

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 902 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649040

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRITZ, JOHN, , MR.,**

Mailing Address P.O. BOX 3115

City  
BIG BEAR LAKEState  
CAZip Code  
92315-3115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649725

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FULLMER, DAVID, W., ,**

Mailing Address 2185 NORTH 1200 EAST

City  
NORTH LOGANState  
UTZip Code  
84341-1838FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CACHE COUNTY SCHOOL DISTRICTOccupation (for Individual)  
FIRE ALARM BUILDING MAINTENANC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649342

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

104.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 903 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FULLMER, DAVID, W., ,**

Mailing Address 2185 NORTH 1200 EAST

City  
NORTH LOGANState  
UTZip Code  
84341-1838FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CACHE COUNTY SCHOOL DISTRICTOccupation (for Individual)  
FIRE ALARM BUILDING MAINTENANC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649406**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAGNON, BERT, , MR.,**Mailing Address 2455 REMINGTON RD  
3City  
GREEN BAYState  
WIZip Code  
54302-4474FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649608**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GAGNON, DONNA, , ,**

Mailing Address 2230 ANDOVER DR APT B

City  
MYRTLE BEACHState  
SCZip Code  
29575-4872FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

352.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648301**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 904 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAGNON, DONNA, , ,**

Mailing Address 2230 ANDOVER DR APT B

City  
MYRTLE BEACHState  
SCZip Code  
29575-4872FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648306

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAGNON, DONNA, , ,**

Mailing Address 2230 ANDOVER DR APT B

City  
MYRTLE BEACHState  
SCZip Code  
29575-4872FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648310

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GAGNON, DONNA, , ,**

Mailing Address 2230 ANDOVER DR APT B

City  
MYRTLE BEACHState  
SCZip Code  
29575-4872FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

352.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648319

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 905 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAGNON, DONNA, , ,**

Mailing Address 2230 ANDOVER DR APT B

City  
MYRTLE BEACHState  
SCZip Code  
29575-4872FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.75

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648322**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALLAGHER, JERRY, , ,**

Mailing Address 3979COUNTY RD 826

City  
ANNAState  
TXZip Code  
75409-3016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.30

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649877**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648126**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 906 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649903

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649906

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GASPAR, MIKLOS, , ,**

Mailing Address 1743 RITCHIE RD

City  
STOWState  
OHZip Code  
44224-1856FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BBDPOccupation (for Individual)  
SOFTWARE ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648881

Amount of Each Receipt this Period

156.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

166.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 907 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GATES, ALTON, , ,**

Mailing Address 9 MUSKOGEE LANE

City  
DESTINState  
FLZip Code  
32541-4432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GATES WINERYOccupation (for Individual)  
WINE MAKER, PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649309**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAVINO, HENRY, , , III**

Mailing Address 386 DRIFTWOOD TERRACE

City

BOCA RATON

State

FL

Zip Code

33431-8259

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648799**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GAVINO, HENRY, , , III**

Mailing Address 386 DRIFTWOOD TERRACE

City

BOCA RATON

State

FL

Zip Code

33431-8259

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

432.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648800**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

145.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 908 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAVINO, HENRY, , , III**

Mailing Address 386 DRIFTWOOD TERRACE

City  
BOCA RATONState  
FLZip Code  
33431-8259FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02		04		2025

**Transaction ID : SA11A.27648815**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GELBMAN, JOEL, , ,**

Mailing Address 6476 ARRIBA AVE

City  
NAPLESState  
FLZip Code  
34113-9061FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02		04		2025

**Transaction ID : SA11A.27650049**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GHAZIL, JAMES, A., DR.,**

Mailing Address 3028 JAMACHA VIEW DR

City  
EL CAJONState  
CAZip Code  
92019-5135FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02		04		2025

**Transaction ID : SA11A.27649327**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 909 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILL, CLIFF, , ,**

Mailing Address 415 LAKESHORE DR

City  
PADUCAHState  
KYZip Code  
42001-5964FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648332

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILLIAM, BOBBY, S., MR.,**

Mailing Address 400 TRAVIS ST STE 1700

City  
SHREVEPORTState  
LAZip Code  
71101-3126FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649864

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLADUE, CRAIG, , ,**

Mailing Address 1061 S SPRUCE AVE

City  
BLOOMINGTONState  
CAZip Code  
92316-1531FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

302.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649254

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 910 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649191

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649192

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649206

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 911 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649210**

Amount of Each Receipt this Period

17.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648794**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

415.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648798**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 912 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648804**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAY, CARL, M., MR.,**

Mailing Address 1015 NUCLEAR RD.

City  
MISHICOTState  
WIZip Code  
54228-9427FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648853**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAY, KAREN, , ,**

Mailing Address 208 BUCKINGHAM DR.

City  
KYLEState  
TXZip Code  
78640-5821FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648935**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

58.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 913 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREAVES, ROGER, F., MR.,**

Mailing Address 9964 E. REFLECTING MOUNTAIN WAY

City  
SCOTTSDALEState  
AZZip Code  
85262-2884FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HEALTH NETOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1249.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649490**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIFFITH, MELINDA, , ,**

Mailing Address 1265 TALL PINES DRIVE

City  
OSTEENState  
FLZip Code  
32764-9764FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WAL-ROSE, INC.Occupation (for Individual)  
ADMINISTRATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648732**

Amount of Each Receipt this Period

240.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650041**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

347.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 914 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2025

**Transaction ID : SA11A.27650042**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2025

**Transaction ID : SA11A.27650043**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2025

**Transaction ID : SA11A.27650045**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 915 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650046

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650047

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROUND, JIM, , ,**

Mailing Address 9791 E DREYFUS AVE

City  
SCOTTSDALEState  
AZZip Code  
85260-4450FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

937.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648822

Amount of Each Receipt this Period

38.01

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

53.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 916 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUDORF, KENNETH, , ,**

Mailing Address 970 CAPE MARCO DR.

City  
MARCO ISLANDState  
FLZip Code  
34145-6399FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1716.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649734**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUENTHER, HART, , ,**

Mailing Address 34 CHOWNING DR.

City  
HAMPTONState  
VAZip Code  
23664-1737FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648149**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUIDA, LISA, , ,**

Mailing Address 1175 PARK AVE

City  
NEW YORKState  
NYZip Code  
10128-1211FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649480**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

230.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 917 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANSEN, TERESA, , ,**

Mailing Address 2917 , KANDAHAR DR

City  
SAINT CHARLESState  
MOZip Code  
63303-3166FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.03

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649460**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSEN, TERESA, , ,**

Mailing Address 2917 , KANDAHAR DR

City  
SAINT CHARLESState  
MOZip Code  
63303-3166FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.03

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649836**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HANSON, BOB, , ,**

Mailing Address 1326 HICKORYCREEK CT.

City  
WICHITAState  
KSZip Code  
67235-7000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WEIGAND OMEGA MGTOccupation (for Individual)  
PROPERTY MGT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

841.35

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649190**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 918 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANSON, BOB, , ,**

Mailing Address 1326 HICKORYCREEK CT.

City  
WICHITAState  
KSZip Code  
67235-7000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WEIGAND OMEGA MGTOccupation (for Individual)  
PROPERTY MGT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

841.35

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649797**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARDY, RICHARD, B., MR.,**

Mailing Address 88 MASONIC HOME RD APT R313

City  
CHARLTONState  
MAZip Code  
01507-3304FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.78

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649075**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAWKINS, PHYLLS, , ,**

Mailing Address 990-9TH AVE NW #202

City  
SAINT PAULState  
MNZip Code  
55112-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.14

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648690**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 919 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAWKINS, PHYLLS, , ,**

Mailing Address 990-9TH AVE NW #202

City  
SAINT PAULState  
MNZip Code  
55112-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648699

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAWKINS, PHYLLS, , ,**

Mailing Address 990-9TH AVE NW #202

City  
SAINT PAULState  
MNZip Code  
55112-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648703

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAWKINS, PHYLLS, , ,**

Mailing Address 990-9TH AVE NW #202

City  
SAINT PAULState  
MNZip Code  
55112-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648704

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 920 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAWKINS, PHYLLS, , ,**

Mailing Address 990-9TH AVE NW #202

City  
SAINT PAULState  
MNZip Code  
55112-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648707

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEATH, DARWIN, , ,**

Mailing Address P.O. BOX 16

City  
SOUTH DENNISState  
MAZip Code  
02660-0016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648952

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEBERT, PETER, , ,**

Mailing Address 3317 S HIGLEY RD SUITE 114-226

City  
GILBERTState  
AZZip Code  
85297-5436FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649860

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 921 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEBL, SHARON, , ,**

Mailing Address 111 E LEMON ST

City  
WEST BRANCHState  
IAZip Code  
52358-1100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649325**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEMBREE, WILLIAM, L., MR.,**

Mailing Address 2626 BLUE MOUNTAIN TRL

City  
LYONSState  
COZip Code  
80540-8461FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648863**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HESSELEIN, DONALD, , ,**

Mailing Address 4220 ORODAM BLVD E

City  
OROVILLEState  
CAZip Code  
95966-9216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649492**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 922 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HICKS, JERRY, , ,**

Mailing Address 1261 DENALI DR, #146

City  
FESTUSState  
MOZip Code  
63028-2382FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649882

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648376

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648718

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 923 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649686**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HODGES, WILLIAM, , ,**

Mailing Address 9681 PLUM CREEK RD

City  
SEALYState  
TXZip Code  
77474-7839FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648677**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLLAND, TERRY, , ,**

Mailing Address 12880 WILLOW BAY DR.

City  
OKLAHOMA CITYState  
OKZip Code  
73165-3201FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649130**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 924 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLLINGTON, MARGARET, , ,**

Mailing Address 9960 ATRIUM WAY APT 514

City  
JACKSONVILLEState  
FLZip Code  
32225-6447FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649141

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLOWAY, RICHARD, , ,**

Mailing Address 5036A CURTIS ROTH LANE

City  
PLEASANT PLAINSState  
ILZip Code  
62677-4119FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649726

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

334.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649627

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.69



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 925 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648908

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648910

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBER, MARY, R., ,**

Mailing Address 37641 30TH STREET

City  
ELMOREState  
MNZip Code  
56027-2035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

699.68

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648188

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 926 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUDSON, ROBERT, Y., MR., JR.**

Mailing Address P.O. BOX 370

City  
SEBASTOPOLState  
MSZip Code  
39359-0370FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649378

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUGHES, MARY ANNE, , ,**

Mailing Address 35803 CORNELL DR

City  
YUCAIPAState  
CAZip Code  
92399-4047FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649801

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUNTER, HOLLAND, , ,**

Mailing Address 2360 YUCCA DR.

City  
CAMARILLOState  
CAZip Code  
93012-8250FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ST. AUGUSTINE ACADEMYOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649171

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 927 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUTCHINSON, ROBERT, , MR.,**

Mailing Address 808 CRIMSON RIDGE TRL

City  
FUQUAY VARINAState  
NCZip Code  
27526-2718FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649856**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. INGRAM, DALE, , ,**

Mailing Address 2255 TRISTRAM ROAD

City  
CHATTANOOGAState  
TNZip Code  
37421-2639FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ERLANGER MEDICAL CENTEROccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649287**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648767**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 928 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IVAN, LAJOS, , ,**

Mailing Address 16 SARATOGA AVE.

City  
BOUND BROOKState  
NJZip Code  
08805-1232FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649894

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACOBS, JEAN, K., ,**

Mailing Address 1141 STEAMBOAT RUN ROAD

City  
SHEPHERDSTOWNState  
WVZip Code  
25443-4132FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648433

Amount of Each Receipt this Period

18.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAUDES, MARY, K., MRS.,**

Mailing Address 12657 BRADFORD WOODS DR.

City  
SAINT LOUISState  
MOZip Code  
63127-1360FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648553

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 929 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAUDES, MARY, K., MRS.,**

Mailing Address 12657 BRADFORD WOODS DR.

City  
SAINT LOUISState  
MOZip Code  
63127-1360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649100**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, GREGORY, , ,**

Mailing Address 22 QUIET YEARLING PL

City  
TOMBALLState  
TXZip Code  
77375-4458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ADVANCED CHIROPRACTIC RELIEF LLCOccupation (for Individual)  
CHIROPRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648640**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGSState  
IDZip Code  
83276-1671FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

508.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648435**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 930 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON MORTON, VALERIE, , ,**

Mailing Address 3391 EAST ORANGE BLOSSOM WAY

City  
ONTARIOState  
CAZip Code  
91761-3926FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2782.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649177

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON MORTON, VALERIE, , ,**

Mailing Address 3391 EAST ORANGE BLOSSOM WAY

City  
ONTARIOState  
CAZip Code  
91761-3926FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2782.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649455

Amount of Each Receipt this Period

312.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, PAM, , ,**

Mailing Address 1401 FAIRPLAY ROAD

City  
RUTLEDGEState  
GAZip Code  
30663-2316FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649602

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

464.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 931 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, SUSAN, , ,**

Mailing Address 3307 PLACID PL

City  
OWENSBOROState  
KYZip Code  
42303-7040FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650207

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAUFFMAN, CLAUDIA, , MS.,**

Mailing Address 3607 HONEYWOOD DRIVE

City  
JOHNSON CITYState  
TNZip Code  
37604-1480FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650080

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648970

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 932 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648114**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEIM, ROBERT, D., MR.,**

Mailing Address 469-27TH AV

City  
EAST MOLINEState  
ILZip Code  
61244-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NESTLE PURINAOccupation (for Individual)  
FORK TRUCK OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649743**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KELEDJIAN, EDWARD, , ,**

Mailing Address 29 KINGSBOROUGH CV

City  
INVERNESSState  
ILZip Code  
60010-5432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

543.40

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649769**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

233.20



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 933 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEMPFERT, VERNON, , ,**

Mailing Address 2724 GLADSTONE AVE

City  
ANN ARBORState  
MIZip Code  
48104-6431FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650192

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KING, JOSEPH, , ,**

Mailing Address 4 FAR HORIZON DR

City  
WALLINGFORDState  
CTZip Code  
06492-2472FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648868

Amount of Each Receipt this Period

32.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNOLLENBERG, ROBERT, , ,**

Mailing Address 280 CANON VIEW RD

City  
BOULDERState  
COZip Code  
80302-9429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

359.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649091

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

77.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 934 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27648141

Amount of Each Receipt this Period

18.22

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27648381

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27648390

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.42

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 935 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648402

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KURTI, S., CAROL, ,**

Mailing Address 934 COWEE SCHOOL RD.

City  
FRANKLINState  
NCZip Code  
28734-4524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.68

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649713

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KURTI, S., CAROL, ,**

Mailing Address 934 COWEE SCHOOL RD.

City  
FRANKLINState  
NCZip Code  
28734-4524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

408.68

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649733

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 936 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAMBRIDES, PAUL, , ,**

Mailing Address 118 MEDICI LOOP

City  
KISSIMMEEState  
FLZip Code  
34759-4048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FAIRWAY REALTY OF SOLIVITAOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648210

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANCE, TERESA, , ,**

Mailing Address 2004 SIFIELD GREENS WAY

City  
SUN CITY CENTERState  
FLZip Code  
33573-7168FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.29

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648438

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANCE, TERESA, , ,**

Mailing Address 2004 SIFIELD GREENS WAY

City  
SUN CITY CENTERState  
FLZip Code  
33573-7168FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.29

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648439

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 937 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANCE, TERESA, , ,**

Mailing Address 2004 SIFIELD GREENS WAY

City  
SUN CITY CENTERState  
FLZip Code  
33573-7168FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.29

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648444**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANTZ, IRENE, L., ,**

Mailing Address 8175 W FARM ROAD 168

City  
REPUBLICState  
MOZip Code  
65738-9327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650109**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LARSEN, ALEXANDER, B., MR.,**

Mailing Address 3795 N CANYON RD

City  
PROVOState  
UTZip Code  
84604-4534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALEXANDER LARSENOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648482**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

187.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 938 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAUGTUG, LOREN, , ,**

Mailing Address 254 MAGOTHY COVE CT

City  
PASADENAState  
MDZip Code  
21122-4169FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648252

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAYO, LEWIS, DANIEL, MR., SR.**

Mailing Address 2316 W VINE ST

City  
LODIState  
CAZip Code  
95242-3727FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
H&R BLOCK TAX GROUPOccupation (for Individual)  
ENROLLED AGENT/TAX PREPARATI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648671

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEACHMAN, C, WILLIAM, ,**

Mailing Address 1450 EUCLID AVE

City  
BOWLING GREENState  
KYZip Code  
42103-2467FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LEACHMAN MOTORSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1015.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650079

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 939 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649213

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649215

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

696.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649216

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 940 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648904

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649199

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEWIS, ED, , ,**

Mailing Address 19585 NORTH 101ST STREET

City  
SCOTTSDALEState  
AZZip Code  
85255-3786FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

629.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648177

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.34



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 941 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWIS, ED, , ,**

Mailing Address 19585 NORTH 101ST STREET

City  
SCOTTSDALEState  
AZZip Code  
85255-3786FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.53

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649586**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LINDER, SPENCER, , ,**

Mailing Address 3043 BRIGHTWOOD LANS SE

City  
MARIETTAState  
GAZip Code  
30067-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649395**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOHMANN, KIMBERLEY, , MS.,**

Mailing Address 12908B GRAYS POINTE RD

City  
FAIRFAXState  
VAZip Code  
22033-2156FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NORTHROP GRUMMANOccupation (for Individual)  
CONTRACTS ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648754**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

307.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 942 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOHMANN, KIMBERLEY, , MS.,**

Mailing Address 12908B GRAYS POINTE RD

City  
FAIRFAXState  
VAZip Code  
22033-2156FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NORTHROP GRUMMANOccupation (for Individual)  
CONTRACTS ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648755**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOHMANN, KIMBERLEY, , MS.,**

Mailing Address 12908B GRAYS POINTE RD

City  
FAIRFAXState  
VAZip Code  
22033-2156FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NORTHROP GRUMMANOccupation (for Individual)  
CONTRACTS ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648760**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOHMANN, KIMBERLEY, , MS.,**

Mailing Address 12908B GRAYS POINTE RD

City  
FAIRFAXState  
VAZip Code  
22033-2156FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NORTHROP GRUMMANOccupation (for Individual)  
CONTRACTS ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649817**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 943 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LORENZ, ALONAH, , MS.,**

Mailing Address 160 40TH AVE SE

City  
BENSONState  
MNZip Code  
56215-1358FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649064**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOTT, SALLY, , ,**

Mailing Address 1009 W. PLEASANT PL

City

SAINT JOHNS

State

FL

Zip Code

32259-5433

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648812**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOWRY, DIANE, , ,**

Mailing Address 9 WOODRIDGE RD

City

MOULTRIE

State

GA

Zip Code

31768-5815

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

307.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650061**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 944 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOWRY, DIANE, , ,**

Mailing Address 9 WOODRIDGE RD

City  
MOULTRIEState  
GAZip Code  
31768-5815FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650064**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649080**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUNDIN, LEROY, , ,**

Mailing Address 28 CHATHAM CT

City  
CROSSVILLEState  
TNZip Code  
38558-2622FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.57

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649508**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

39.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 945 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACEYKO, ROBERT, , ,**

Mailing Address 45 HIGHLAND AVE

City  
WALDENState  
NYZip Code  
12586-1429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BERNIES BUS SERVICE INC.Occupation (for Individual)  
SCHOOL BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649858**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACKENZIE, THOMAS, S., MR.,**

Mailing Address 16635 W SHERIDAN ST

City  
GOODYEARState  
AZZip Code  
85395-1905FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648883**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAEKAWA, YOSHIMITSU, , ,**

Mailing Address 2349 123RD STREET

City  
COLLEGE POINTState  
NYZip Code  
11356-2639FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648130**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 946 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAEKAWA, YOSHIMITSU, , ,**

Mailing Address 2349 123RD STREET

City  
COLLEGE POINT

State  
NY

Zip Code  
11356-2639

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.56

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

**Transaction ID : SA11A.27648134**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAEKAWA, YOSHIMITSU, , ,**

Mailing Address 2349 123RD STREET

City  
COLLEGE POINT

State  
NY

Zip Code  
11356-2639

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.56

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

**Transaction ID : SA11A.27648135**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAEKAWA, YOSHIMITSU, , ,**

Mailing Address 2349 123RD STREET

City  
COLLEGE POINT

State  
NY

Zip Code  
11356-2639

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

452.56

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

**Transaction ID : SA11A.27648136**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

81.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 947 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARETT, TOM, M., MR.,**

Mailing Address 1319 SELLERS ST

City  
PHILADELPHIAState  
PAZip Code  
19124-3627FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648324

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARSHALL, KENNETH, , ,**

Mailing Address 2 DARBY GLEN

City  
SAN ANTONIOState  
TXZip Code  
78257-1223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649998

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, HELEN, , ,**

Mailing Address 1620 DOGWOOD TRL

City  
CORSICANAState  
TXZip Code  
75110-1036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KDOccupation (for Individual)  
ADMISSIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

302.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649374

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

182.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 948 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTINSON, RODNEY, , ,**

Mailing Address 13531 W SKY HAWK DR.

City  
SUN CITY WESTState  
AZZip Code  
85375-5832FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.99

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649343**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649422**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649802**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 949 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649763**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATHEAUS, PAT, G., ,**

Mailing Address PO BOX 63810

City  
PIPE CREEKState  
TXZip Code  
78063-3810FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648225**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATHEWS, TIMOTHY, , ,**

Mailing Address 388 PALOMARES AVENUE

City  
VENTURAState  
CAZip Code  
93003-1737FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

727.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649160**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 950 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCOSH, DONALD, K., MR.,**

Mailing Address 11504 STATE AVE

City  
OKLAHOMA CITYState  
OKZip Code  
73162-3719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.93

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648220

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCOSH, DONALD, K., MR.,**

Mailing Address 11504 STATE AVE

City  
OKLAHOMA CITYState  
OKZip Code  
73162-3719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.93

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648230

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCOSH, DONALD, K., MR.,**

Mailing Address 11504 STATE AVE

City  
OKLAHOMA CITYState  
OKZip Code  
73162-3719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.93

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648237

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 951 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCOSH, DONALD, K., MR.,**

Mailing Address 11504 STATE AVE

City  
OKLAHOMA CITYState  
OKZip Code  
73162-3719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648244

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCOSH, DONALD, K., MR.,**

Mailing Address 11504 STATE AVE

City  
OKLAHOMA CITYState  
OKZip Code  
73162-3719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648248

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCOSH, DONALD, K., MR.,**

Mailing Address 11504 STATE AVE

City  
OKLAHOMA CITYState  
OKZip Code  
73162-3719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648251

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 952 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCOSH, DONALD, K., MR.,**

Mailing Address 11504 STATE AVE

City  
OKLAHOMA CITYState  
OKZip Code  
73162-3719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648254

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCGINNIS, CHARLES, R., MR.,**

Mailing Address 447 WOODHILL DR

City  
OWINGS MILLSState  
MDZip Code  
21117-1372FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MANAGER OF DEPT OF DEFENSEOccupation (for Individual)  
ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649384

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCGREEVY, KEVIN, J., MR.,**

Mailing Address 2161 CHAIN BRIDGE RD

City  
VIENNAState  
VAZip Code  
22182-6033FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NETWORK DESIGNS INC.Occupation (for Individual)  
EXEC VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650059

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

177.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 953 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCMAHAN, HOWARD, C., MRS.,**

Mailing Address PO BOX 779

City  
OCILLAState  
GAZip Code  
31774-0779FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FAMILY PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649095

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCPHERSON, JIMMY, , ,**

Mailing Address 5644S.DESERT LAKES DR

City  
FORT MOHAVEState  
AZZip Code  
86426-9298FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649324

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEEHAN, JOAN, , ,**

Mailing Address 2874 GOLDEN GATE AVE

City  
SAN FRANCISCOState  
CAZip Code  
94118-4111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1962.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649214

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

149.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 954 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MENDOZA, ALFRED, , ,**

Mailing Address 606 AUGUSTA CT

City  
FULLERTONState  
CAZip Code  
92835-2769FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IDENTIGRAPHIXOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.10

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649251**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27650227**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.88

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27650228**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 955 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650229

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650230

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650232

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 956 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MERTZ, PAUL, , MR.,**

Mailing Address 5 GALE AVE

City  
RIVER FORESTState  
ILZip Code  
60305-2009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649683

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MERTZ, PAUL, , MR.,**

Mailing Address 5 GALE AVE

City  
RIVER FORESTState  
ILZip Code  
60305-2009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649788

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERTZ, PAUL, , MR.,**

Mailing Address 5 GALE AVE

City  
RIVER FORESTState  
ILZip Code  
60305-2009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1740.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649790

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

119.72

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 957 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MESSERSMITH, CHARLES, , ,**

Mailing Address 604 HATCHWOOD DR.

City  
HAINES CITYState  
FLZip Code  
33844-8208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JEHOVAHOccupation (for Individual)  
PREACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650191**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIDDLETON, JOHN, , ,**

Mailing Address 712 RIDGE RD

City  
HIGHLAND PARKState  
ILZip Code  
60035-3834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649350**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, ANNE, , ,**

Mailing Address 6 RONNA RD

City  
GLOUCESTERState  
MAZip Code  
01930-1665FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1006.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649043**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 958 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650136**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MINTZ, MICHAEL, , ,**

Mailing Address 19458 WATERS REACH LN

City  
BOCA RATONState  
FLZip Code  
33434-5115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WASTE COST SOLUTIONSOccupation (for Individual)  
GARBAGE CONSULTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649470**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MODELL, ROBIN, , ,**

Mailing Address PO BOX235

City  
ALPINEState  
NJZip Code  
07620-0235FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649897**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 959 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MODELL, ROBIN, , ,**

Mailing Address PO BOX235

City  
ALPINEState  
NJZip Code  
07620-0235FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649900**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MODELL, ROBIN, , ,**

Mailing Address PO BOX235

City  
ALPINEState  
NJZip Code  
07620-0235FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649901**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOHLER, JOHN, , ,**

Mailing Address 20 ENGLISH ELM COURT

City  
CATONSVILLEState  
MDZip Code  
21228-5800FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TOWEROccupation (for Individual)  
AUDITOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648659**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 960 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOMARY, NED, , ,**

Mailing Address 3412 THE STRAND

City  
MANHATTAN BEACHState  
CAZip Code  
90266-3350FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649361**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648140**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648378**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 961 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648447**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648857**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRIS, MIKE , , ,**

Mailing Address 578 SNAPDRAGON WAY

City  
IMPERIALState  
CAZip Code  
92251-8947FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

842.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649208**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 962 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORTER, CLYDE, , ,**

Mailing Address 14213 WASHINGTON ST

City  
WOODSTOCKState  
ILZip Code  
60098-9464FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GUY MACHOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648355**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MULAR, KATHLEEN, , ,**

Mailing Address 8215 BUNTON ROAD

City  
WILLISState  
MIZip Code  
48191-9501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PARKWAY SERVICES INCOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.18

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27650031**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

955.83

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649382**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 963 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649383**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NAKOFF, MICHAEL, H., MR.,**

Mailing Address 341 COLUMBUS AVE

City  
BATESVILLEState  
INZip Code  
47006-4313FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649855**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NANDE, MARIA, , ,**

Mailing Address 1036 AQUIA DRIVE

City  
STAFFORDState  
VAZip Code  
22554-1942FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NVR INCOccupation (for Individual)  
SALES AND MKTG REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648223**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 964 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEVES, RICHARD, , ,**

Mailing Address 737 DANE CT

City  
HEMETState  
CAZip Code  
92543-1785FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648814

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NGUYEN, NGAI, X., DR.,**Mailing Address 696 EAST SANTA CLARA STREET  
108City  
SAN JOSEState  
CAZip Code  
95112-1911FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1564.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648311

Amount of Each Receipt this Period

495.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NICHOLS, PHIL, , ,**

Mailing Address 407 WEST CORNELL STREET

City  
AVON PARKState  
FLZip Code  
33825-3700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1266.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648967

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

610.90



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 965 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NIGENT, SUSAN, , ,**

Mailing Address 2445 FAWNLAKE CIRCLE

City  
KATYState  
TXZip Code  
77493-8093FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648583**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOBLE, CRISTINA, HEEREN, ,**

Mailing Address 1200 FIFTH AVENUE

City  
NEW YORKState  
NYZip Code  
10029-5208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1168.54

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648339**

Amount of Each Receipt this Period

281.07

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

589.96

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649198**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

391.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 966 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O' BRIEN, CYNTHIA, , ,**

Mailing Address 15830 KNOLL LAKE DR.

City  
HOUSTONState  
TXZip Code  
77095-2640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648573

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O' BRIEN, CYNTHIA, , ,**

Mailing Address 15830 KNOLL LAKE DR.

City  
HOUSTONState  
TXZip Code  
77095-2640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648577

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O' BRIEN, CYNTHIA, , ,**

Mailing Address 15830 KNOLL LAKE DR.

City  
HOUSTONState  
TXZip Code  
77095-2640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

540.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648585

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 967 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O'CARROLL, JAMES, , ,**

Mailing Address 2304 BERTEAU DR.

City  
WAKE FORESTState  
NCZip Code  
27587-8042FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649928**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O'FLYNN, ARMINDA, , ,**

Mailing Address 12864 BISCAYNE BLVD

City  
N. MIAMIState  
FLZip Code  
33181-2007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

992.53

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649977**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'NEAL, KAREN, , MS.,**

Mailing Address 8119 WYCOMB DR.

City  
HOUSTONState  
TXZip Code  
77070-3233FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649056**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 968 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649524

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649525

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649527

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 969 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649529**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649531**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649532**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 970 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649756

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649757

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649760

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 971 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649762**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648905**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OTTO, JEFF, S., MR.,**

Mailing Address 25580 DODD BLVD

City  
LAKEVILLEState  
MNZip Code  
55044-8563FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

237.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649306**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 972 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALMER, LORETTA, , ,**

Mailing Address 1215 ANCHORS WAY DR. SPCE 140

City  
VENTURAState  
CAZip Code  
93001-0277FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649425

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PANDOLFO, MICHAEL, , MR.,**

Mailing Address 7900 SUTHERLAND FARM RD

City  
PROSPECTState  
KYZip Code  
40059-9269FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649049

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAPPAS, JAMES, , ,**

Mailing Address 6202 APPIAN WAY

City  
RIVERSIDEState  
CAZip Code  
92506-4555FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648807

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

122.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 973 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649226

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, TERRY, A., MR.,**

Mailing Address 6210 PLOVERMEADOW STREET

City  
LITHIAState  
FLZip Code  
33547-4366FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648941

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PILKINGTON, CURT, , MR.,**

Mailing Address 226 S SECOND ST.

City  
STERLINGState  
COZip Code  
80751-4217FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CURT PILKINGTONOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1024.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648272

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

208.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 974 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PINCHES, CYNTHIA, , ,**

Mailing Address 16 BUNKER HILL ROAD

City  
NEW BRITAINState  
CTZip Code  
06053-2206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1376.26

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27648725

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PINCHES, CYNTHIA, , ,**

Mailing Address 16 BUNKER HILL ROAD

City  
NEW BRITAINState  
CTZip Code  
06053-2206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1376.26

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27649294

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PINCHES, CYNTHIA, , ,**

Mailing Address 16 BUNKER HILL ROAD

City  
NEW BRITAINState  
CTZip Code  
06053-2206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1376.26

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27649379

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 975 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PISTORINO, MARIA, , MS.,**

Mailing Address 6535 SW 123RD STREET

City  
PINECRESTState  
FLZip Code  
33156-5554FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

983.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2025

**Transaction ID : SA11A.27649750**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PITE, WILLAIM, , ,**

Mailing Address 157 GOOSE LN

City  
GUILFORDState  
CTZip Code  
06437-2100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2025

**Transaction ID : SA11A.27649798**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PLENDERLEITH, GRACE, , ,**

Mailing Address 111 FALCON RIDGE DRIVE

City  
IRWINState  
PAZip Code  
15642-3094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2025

**Transaction ID : SA11A.27649510**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 976 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648115**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.88

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648646**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.88

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648746**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 977 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRESTON, BRADLEY, B., MR.,**

Mailing Address 2109 SOMMER ST

City  
NAPAState  
CAZip Code  
94559-4306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650115**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650081**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650082**

Amount of Each Receipt this Period

5.22

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.22

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 978 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650083

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650085

Amount of Each Receipt this Period

10.42

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAINEY, DAVID, L., MR.,**

Mailing Address 1791 RAMPART DR.

City  
ALEXANDRIAState  
VAZip Code  
22308-1655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648384

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 979 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REINHARD, ROSEMARIE, , MR.,**

Mailing Address 2755 FALCON STREET

City  
EAST MEADOWState  
NYZip Code  
11554-4318FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.15

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648626**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RENTOF, PETER, , ,**Mailing Address 235 EAST 22ND STREET  
7DCity  
NEW YORKState  
NYZip Code  
10010-4635FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.33

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648619**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICHTER, PAUL, , ,**

Mailing Address P.O. BOX 216

City  
CATHARPINState  
VAZip Code  
20143-0216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RMFOccupation (for Individual)  
LAWYER,ENGINEER,PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648741**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 980 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICHTER, PAUL, , ,**

Mailing Address P.O. BOX 216

City  
CATHARPIN

State  
VA

Zip Code  
20143-0216

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RMF

Occupation (for Individual)  
LAWYER,ENGINEER,PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

**Transaction ID : SA11A.27648742**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLE

State  
NC

Zip Code  
28311-7675

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

**Transaction ID : SA11A.27649636**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLE

State  
NC

Zip Code  
28311-7675

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

**Transaction ID : SA11A.27649637**

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

255.20



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 981 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RILEY, BRUCE, A., ,**

Mailing Address 2720 DONALD ROSS RD

City  
PALM BEACH GARDENSState  
FLZip Code  
33410-1161FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.20

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648352**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RITTER, ANN, W., MS.,**

Mailing Address 2551 PALOMINO DR.

City  
CAPE GIRARDEAUState  
MOZip Code  
63701-1958FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1805.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649938**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIVERO, JORGE, , ,**

Mailing Address 377 EAGLE CREEK CIR

City  
LAKE MARYState  
FLZip Code  
32746-3830FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

414.40

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649937**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 982 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBERTS, GARY, D., MR.,**

Mailing Address 6206 APPIAN WAY

City  
RIVERSIDEState  
CAZip Code  
92506-4555FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648440

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBERTS, RICHARD, J., MR.,**

Mailing Address 12418 FOX HOLLOW

City  
BAKERSFIELDState  
CAZip Code  
93312-3606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649132

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, JAMES, , ,**

Mailing Address 2034 MOFFITT CREEK RD

City  
BLACKSTOCKState  
SCZip Code  
29014-8845FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650219

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 983 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROE, JOAN, , MRS.,**

Mailing Address 360 W NOKOMIS CT

City  
FOX POINTState  
WIZip Code  
53217-2611FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649013**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROE, JOAN, , MRS.,**

Mailing Address 360 W NOKOMIS CT

City  
FOX POINTState  
WIZip Code  
53217-2611FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650215**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, JIM, , ,**

Mailing Address 443 CRABAPPLE DR.

City  
HOWARDState  
OHZip Code  
43028-9575FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650050**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 984 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27650164

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27650165

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.78

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27650166

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 985 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27650167

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27649366

Amount of Each Receipt this Period

2.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27649548

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 986 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27649892

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27649107

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUMBAUGH, EMILY, , ,**

Mailing Address 176 RIDGEDALE

City  
RIDGEDALEState  
MOZip Code  
65739-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BONOBO HOPEOccupation (for Individual)  
RESEARCH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

344.53

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27648726

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 987 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUNALDUE, DONALD, , MR.,**

Mailing Address 32 PLANTATION DR.

City  
SOUTHERN PINESState  
NCZip Code  
28387-2967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648506**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUTKOWSKI, LINDA, , ,**

Mailing Address 4133 SHADY OAKS DRIVE

City  
MARTINEZState  
GAZip Code  
30907-7911FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648942**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RYAN, ROBERT, C., MR.,**

Mailing Address 95 RIMFIRE CIRCLE

City  
RENOState  
NVZip Code  
89519-2989FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOLLAND & HART LLPOccupation (for Individual)  
PATENT & IP ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648595**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 988 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RYERSE, TIM, , ,**

Mailing Address 11609 NE 185TH ST

City  
BATTLE GROUNDState  
WAZip Code  
98604-7374FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649679

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SADAR, AMELIA, , MS.,**

Mailing Address 1604STONE MANSION DR.

City  
SEWICKLEYState  
PAZip Code  
15143-8601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648838

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SALINAS, BERTHA, , ,**

Mailing Address 18864 RIDGEBACK CT

City  
LEESBURGState  
VAZip Code  
20176-8252FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CKOccupation (for Individual)  
DEFENSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649514

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

218.62



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 989 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOOD

State  
AL

Zip Code  
36034-3204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

**Transaction ID : SA11A.27649640**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOOD

State  
AL

Zip Code  
36034-3204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

**Transaction ID : SA11A.27649642**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOOD

State  
AL

Zip Code  
36034-3204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

**Transaction ID : SA11A.27649645**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

87.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 990 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649651**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649658**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649662**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 991 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

**02** / **04** / **2025****Transaction ID : SA11A.27649768**

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

**02** / **04** / **2025****Transaction ID : SA11A.27649770**

Amount of Each Receipt this Period

1.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAULSBERRY, GAREN, , ,**

Mailing Address 4440 LONESOME PINE ROAD

City  
LAS CRUCESState  
NMZip Code  
88007-4566FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PERATONOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

**02** / **04** / **2025****Transaction ID : SA11A.27648564**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 992 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAVAGE, NEIL, , MR.,**Mailing Address 150 2ND AVE N  
STE 1600City  
SAINT PETERSBURGState  
FLZip Code  
33701-3343FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649108**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCARLETT, KENNETH, , ,**

Mailing Address 17114 PARK LODGE DR.

City  
SPRINGState  
TXZip Code  
77379-4493FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649489**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHEFFRAHN, KARL, , ,**

Mailing Address 126 CR 2337

City  
MINEOLAState  
TXZip Code  
75773-3272FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649371**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

211.79

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 993 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648877**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHRAM, CHARLES, , ,**

Mailing Address 14816 WEST HURON DRIVE

City  
SUN CITY WESTState  
AZZip Code  
85375-5988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.52

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27650171**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCONTRINO, JOSEPH, , ,**

Mailing Address 6424 CANAL BLVD

City  
NEW ORLEANSState  
LAZip Code  
70124-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649523**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 994 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCOTT, AUDREY, , ,

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648537

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCOTT, AUDREY, , ,

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648541

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCOTT, AUDREY, , ,

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648542

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 995 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648543

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648546

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649150

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 996 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649153

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649154

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649155

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.99



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 997 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649157

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHAYS, LORRAINE, , ,**

Mailing Address 14659 CANALVIEW DRIVE APT A

City  
DELRAY BEACHState  
FLZip Code  
33484-3722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648685

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHUGER, JILL, , ,**

Mailing Address N7756 BUSHEY RD

City  
TREGOState  
WIZip Code  
54888-9327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649266

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

21.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 998 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLOCUMB, JOANELLEN, H., MRS.,**

Mailing Address PO 3892

City  
INCLINE VILLAGEState  
NVZip Code  
89450-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650113

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, ALLISSA, , ,**

Mailing Address 1228 WINDSOR HARBOR DR.

City  
JACKSONVILLEState  
FLZip Code  
32225-2651FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649701

Amount of Each Receipt this Period

180.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, KELLY, , ,**

Mailing Address 5800 GRASSMERE LANE

City  
DALLASState  
TXZip Code  
75205-4624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649871

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 999 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, MICHAEL, A., MR.,**

Mailing Address P.O. BOX 971

City  
MIDDLEBURGState  
VAZip Code  
20118-0971FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VALLEY PROTEINS, INC.Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8274.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649256

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, MICHAEL, A., MR.,**

Mailing Address P.O. BOX 971

City  
MIDDLEBURGState  
VAZip Code  
20118-0971FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VALLEY PROTEINS, INC.Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8274.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649260

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, TOM, R., MR.,**

Mailing Address 1125 MARK PLACE, NW

City  
KENNESAWState  
GAZip Code  
30144-6301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

272.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649672

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

143.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1000 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648167**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOERTEL, GREGG, S., MR.,**

Mailing Address 116 SOUTHERN VALLEY CT

City  
MARSState  
PAZip Code  
16046-9306FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PPM CONSULTINGOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.88

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648607**

Amount of Each Receipt this Period

31.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOKENIS, ROGER, , ,**

Mailing Address 16 ST JOHNS AVENUE

City  
HICKSVILLEState  
NYZip Code  
11801-5208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648419**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1001 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOLEANICOV, PAVEL, A., MR.,**

Mailing Address 711 MEADOW CREST DRIVE

City  
ROCKTONState  
ILZip Code  
61072-8000FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649289**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLTYSIAK, CAROL, , ,**

Mailing Address 12120 NE 234TH ST

City  
ARCADIAState  
OKZip Code  
73007-9010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648809**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPAIN, KEN, , ,**

Mailing Address 104 SAINT HELENS AVE

City  
MOXEEState  
WAZip Code  
98936-9012FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

346.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649516**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1002 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPALLONE, ARLENE, , ,**

Mailing Address 5925 BRAE BURN CIR

City  
VERO BEACHState  
FLZip Code  
32967-5277FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649830**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPEED, RICHARD, , DR.,**

Mailing Address 1611 SYCAMORE AVENUE

City  
HERCULESState  
CAZip Code  
94547-1768FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648531**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27650185**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

386.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1003 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEELE, MERILYN, , ,**

Mailing Address 7040 AVENIDA ENCINAS # 104-239

City  
CARLSBADState  
CAZip Code  
92011-4652FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MESSNER STEELE LAW FIRM, PCOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648990**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STENDAHL, GARY, , ,**

Mailing Address 1130 MOORE DR

City  
FLORENCEState  
COZip Code  
81226-9590FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648785**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STIEL, HUGH, , ,**

Mailing Address 601 N FORT LAUDETDALE BLVD

City  
FORT LAUDERDALEState  
FLZip Code  
33304-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648550**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

239.10

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1004 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STRECKER, GARY, , ,

Mailing Address 8007 WHITE OAK AVE

City  
RESEDAState  
CAZip Code  
91335-1534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648437

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRECKER, GARY, , ,

Mailing Address 8007 WHITE OAK AVE

City  
RESEDAState  
CAZip Code  
91335-1534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648442

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRECKER, GARY, , ,

Mailing Address 8007 WHITE OAK AVE

City  
RESEDAState  
CAZip Code  
91335-1534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

536.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648452

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

24.50



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1005 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRECKER, GARY, , ,**

Mailing Address 8007 WHITE OAK AVE

City  
RESEDAState  
CAZip Code  
91335-1534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.21

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648465**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRECKER, GARY, , ,**

Mailing Address 8007 WHITE OAK AVE

City  
RESEDAState  
CAZip Code  
91335-1534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.21

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648474**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRECKER, GARY, , ,**

Mailing Address 8007 WHITE OAK AVE

City  
RESEDAState  
CAZip Code  
91335-1534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.21

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649007**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1006 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRECKER, GARY, , ,**

Mailing Address 8007 WHITE OAK AVE

City  
RESEDAState  
CAZip Code  
91335-1534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.21

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649012**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRECKER, GARY, , ,**

Mailing Address 8007 WHITE OAK AVE

City  
RESEDAState  
CAZip Code  
91335-1534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.21

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649016**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRECKER, GARY, , ,**

Mailing Address 8007 WHITE OAK AVE

City  
RESEDAState  
CAZip Code  
91335-1534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

536.21

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649018**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

40.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1007 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRECKER, GARY, , ,**

Mailing Address 8007 WHITE OAK AVE

City  
RESEDAState  
CAZip Code  
91335-1534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.21

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27649023

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRECKER, GARY, , ,**

Mailing Address 8007 WHITE OAK AVE

City  
RESEDAState  
CAZip Code  
91335-1534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.21

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27649027

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRECKER, GARY, , ,**

Mailing Address 8007 WHITE OAK AVE

City  
RESEDAState  
CAZip Code  
91335-1534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.21

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27649034

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

61.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1008 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUDLIK, DANIEL, , ,**

Mailing Address 18 LIMESTONE RD

City  
ARMONKState  
NYZip Code  
10504-2305FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.50

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27650044**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUDOL, JEAN, , ,**

Mailing Address 2640 GATELY DRIVE WEST

City  
WEST PALM BEACHState  
FLZip Code  
33415-7996FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.79

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648896**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TARR, ANNE, , ,**

Mailing Address 13306 SOUTHWALK

City  
SAN ANTONIOState  
TXZip Code  
78232-4843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

987.25

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649714**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.94

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1009 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULA

State  
MT

Zip Code  
59804-5849

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.60

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

**Transaction ID : SA11A.27649547**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULA

State  
MT

Zip Code  
59804-5849

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.60

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

**Transaction ID : SA11A.27649550**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULA

State  
MT

Zip Code  
59804-5849

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

562.60

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

**Transaction ID : SA11A.27649554**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

22.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1010 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULAState  
MTZip Code  
59804-5849FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.60

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27649557

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULAState  
MTZip Code  
59804-5849FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.60

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27649562

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULAState  
MTZip Code  
59804-5849FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

562.60

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27649565

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

54.72

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1011 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TECMIRE, EUNICE, M., ,**

Mailing Address 888 TWIN CREEKS CROSSING 308

City  
CENTRAL POINTState  
ORZip Code  
97502-5507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648256**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TETU, EMILE, , ,**

Mailing Address 44 NORRIS STREET

City  
MANCHESTERState  
NHZip Code  
03103-3726FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649555**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANEState  
UTZip Code  
84737-1405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

815.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648849**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1012 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANEState  
UTZip Code  
84737-1405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.62

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648850**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANEState  
UTZip Code  
84737-1405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.62

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648854**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANEState  
UTZip Code  
84737-1405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

815.62

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648855**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.36



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1013 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANE

State  
UT

Zip Code  
84737-1405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

**Transaction ID : SA11A.27648856**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANE

State  
UT

Zip Code  
84737-1405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

**Transaction ID : SA11A.27648858**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANE

State  
UT

Zip Code  
84737-1405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

815.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

**Transaction ID : SA11A.27648859**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

97.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1014 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, KAREN, , MRS.,**

Mailing Address 27 ARIZONA STATE DR.

City  
NEWARKState  
DEZip Code  
19713-1145FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
D&S WAREHOUSING INCOccupation (for Individual)  
SMALL BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650155

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, WILLIAM, , MR.,**

Mailing Address 204 MANDALAY

City  
SAN MARCOSState  
TXZip Code  
78666-3631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649777

Amount of Each Receipt this Period

20.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TILTON, RAY, , ,**

Mailing Address 2101 HILLSIDE AVE

City  
NEW HYDE PARKState  
NYZip Code  
11040-2712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648579

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

129.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1015 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TOPPASS, WALLACE, , ,**

Mailing Address 303 KINGSCOURT DR.

City  
HOUSTONState  
TXZip Code  
77015-2320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENTERPRISE PRODUCTSOccupation (for Individual)  
PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650103

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TORTORA, PETER, , MR.,**

Mailing Address 45 REILLY RD

City  
EASTONState  
CTZip Code  
06612-1736FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FAIRFIELD MEDICAL GROUP, LLCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648556

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TROYER, DENNIS, , ,**

Mailing Address 2192 GLEN COVE WAY

City  
HIGH POINTState  
NCZip Code  
27265-9445FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

377.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649275

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

231.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1016 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VALLE, WILLIAM, , ,**

Mailing Address 20140 RIVERBROOKE RUN

City  
ESTEROState  
FLZip Code  
33928-2979FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.32

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649973**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VANDERSPEK, DONNA, , ,**

Mailing Address 840 40TH AVENUE NORTHEAST

City  
WILLMARState  
MNZip Code  
56201-9203FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.16

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649149**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VATTHAUER, VIRGENE, A., MRS.,**

Mailing Address 1321STRATFORD COURT

City  
MIDDLETONState  
WIZip Code  
53562-3675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.65

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649473**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

191.16

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1017 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAUGHAN, THOMAS, , ,**

Mailing Address 70 EAST BROOKE STREET

City  
JACKSON

State  
MS

Zip Code  
39216-4714

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

**Transaction ID : SA11A.27648548**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAUGHAN, THOMAS, , ,**

Mailing Address 70 EAST BROOKE STREET

City  
JACKSON

State  
MS

Zip Code  
39216-4714

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

**Transaction ID : SA11A.27649184**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAUGHAN, THOMAS, , ,**

Mailing Address 70 EAST BROOKE STREET

City  
JACKSON

State  
MS

Zip Code  
39216-4714

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

915.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

**Transaction ID : SA11A.27649620**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

203.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1018 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VLIET, KIRSTEN, , ,**

Mailing Address 3300 BEE CAVE RD

City  
WEST LAKE HILLSState  
TXZip Code  
78746-6600FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BICOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649364

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648632

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650199

Amount of Each Receipt this Period

9.63

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1019 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WADHAM, THOMAS, A., ,**

Mailing Address 600 FOREST GROVE AVE

City  
DAYTONState  
OHZip Code  
45406-4434FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648274

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WADHAM, THOMAS, A., ,**

Mailing Address 600 FOREST GROVE AVE

City  
DAYTONState  
OHZip Code  
45406-4434FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648278

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WADHAM, THOMAS, A., ,**

Mailing Address 600 FOREST GROVE AVE

City  
DAYTONState  
OHZip Code  
45406-4434FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

336.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648280

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

59.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1020 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WADHAM, THOMAS, A., ,**

Mailing Address 600 FOREST GROVE AVE

City  
DAYTONState  
OHZip Code  
45406-4434FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.41

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27648283

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WADHAM, THOMAS, A., ,**

Mailing Address 600 FOREST GROVE AVE

City  
DAYTONState  
OHZip Code  
45406-4434FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.41

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27648285

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALDROP, MARGIE, WHITMER, MS.,**

Mailing Address 921 SEQUOIA DR.

City  
LANCASTERState  
TXZip Code  
75146-2231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025

Transaction ID : SA11A.27649543

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.94



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1021 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALKER, KEVIN, W., ,**

Mailing Address 545 NECTAR ST.

City  
RENOState  
NVZip Code  
89506-8915FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.64

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648519**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALLING, FRANCES, J., ,**

Mailing Address 14604 E 37TH ST S

City

INDEPENDENCE

State

MO

Zip Code

64055-3436

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.04

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27650008**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATTS, ELAINE, , ,**

Mailing Address 165 NOVA CIR

City

ALPINE

State

AL

Zip Code

35014-7010

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

318.73

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649272**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1022 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEBB, ROSS, A., MR.,**

Mailing Address 6312 N LE MAI AVE.

City  
CHICAGOState  
ILZip Code  
60646-4828FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27648472

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEIDNER GOLDSTEIN, JEAN, , ,**

Mailing Address 990 BOULEVARD OF THE ARTS

City  
SARASOTAState  
FLZip Code  
34236-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27649722

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELCH, GARY, , ,**

Mailing Address 3349 AN COUNTY RD 463

City  
MONTALBAState  
TXZip Code  
75853-2933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

331.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA11A.27650098

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

182.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1023 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WETZEL, JOAN, C., MS.,**

Mailing Address 2508 PINE ST. APT. F

City  
NEW ORLEANSState  
LAZip Code  
70125-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.36

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649059**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHEELER, MIEKA, L., ,**

Mailing Address 27230 STONEY BROOK DR

City  
TRENTONState  
MIZip Code  
48183-4640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.05

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27649129**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WICKER, DUANE, , MR.,**

Mailing Address 4447 LAVENDER LN

City  
PAHRUMPState  
NVZip Code  
89061-0135FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.80

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2025**Transaction ID : SA11A.27648989**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1024 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSHIRE, RICK, , ,**

Mailing Address 101 SUMMIT AVE SUITE 410

City  
FORT WORTHState  
TXZip Code  
76102-2611FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WILSHIRE CONSULTANTS INCOccupation (for Individual)  
TAX FINANCIAL PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649851**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, JEAN, , ,**

Mailing Address 5644 ARAL DRIVE

City  
LAKELANDState  
FLZip Code  
33805-9615FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648673**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINGFIELD, REBECCA, C., MRS.,**

Mailing Address 11800 CYPRESS RD

City  
DIXONState  
MOZip Code  
65459-7212FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

447.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648674**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1025 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOOD, DARLENE, , ,**

Mailing Address 38207 N ARMADILLO DR, LAREDO RANCH

City  
SAN TAN VALLEYState  
AZZip Code  
85140-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

852.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649346**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOOD, DARLENE, , ,**

Mailing Address 38207 N ARMADILLO DR, LAREDO RANCH

City  
SAN TAN VALLEYState  
AZZip Code  
85140-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

852.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27649783**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YENSEL, PATRICIA, , ,**

Mailing Address 4811 RASPBERRY CIRCLE

City  
RAVENNAState  
OHZip Code  
44266-7843FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2025**Transaction ID : SA11A.27648985**

Amount of Each Receipt this Period

70.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1026 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11C.27651292

Amount of Each Receipt this Period

69595.26

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABUID, JULIA, , ,**

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652212

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABUID, JULIA, , ,**

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652221

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

11.46

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1027 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABUID, JULIA, , ,**

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652224**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAIR, STEFAN, , DR.,**

Mailing Address 8591 SKYLINE DR.

City  
LOS ANGELESState  
CAZip Code  
90046-1042FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653081**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AGUILERA, ROBERT, A., MR.,**

Mailing Address 8185 BENEVENTO DR

City  
EL DORADO HILLSState  
CAZip Code  
95762-6217FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

359.96

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652097**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

69.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1028 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AHLQUIST, DAVID, , ,**

Mailing Address 11555 CULEBRA ROAD LOT 74

City  
SAN ANTONIOState  
TXZip Code  
78253-4889FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.18

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652319**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AHLQUIST, DAVID, , ,**

Mailing Address 11555 CULEBRA ROAD LOT 74

City  
SAN ANTONIOState  
TXZip Code  
78253-4889FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.18

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652320**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALFARO, ROSA, , ,**

Mailing Address 3059 HAWKSCREST DR

City  
WINCHESTERState  
CAZip Code  
92596-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

710.59

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653030**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

67.67



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1029 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLEN, DON, , ,**

Mailing Address 2123 GERARDO AVE

City  
THE VILLAGESState  
FLZip Code  
32159-9430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653230**

Amount of Each Receipt this Period

42.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALTIG, WILLIAM, , ,**

Mailing Address 3451 WESTERN CENTER BLVD

City  
FORT WORTHState  
TXZip Code  
76137-3101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OPTOMETRIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652165**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALTIG, WILLIAM, , ,**

Mailing Address 3451 WESTERN CENTER BLVD

City  
FORT WORTHState  
TXZip Code  
76137-3101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OPTOMETRIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652363**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1030 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652267

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMSTUTZ, SHERYL, , ,**Mailing Address 1307 S WATER ST  
UNIT 90City  
SILVERTONState  
ORZip Code  
97381-2471FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

866.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652737

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652976

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1031 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653062**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, NANCY, , ,**

Mailing Address 575 72ND ST SE

City  
MONTROSEState  
MNZip Code  
55363-8003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FOOD SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652462**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, NANCY, , ,**

Mailing Address 575 72ND ST SE

City  
MONTROSEState  
MNZip Code  
55363-8003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FOOD SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

353.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652464**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1032 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, RONALD, , MR.,**

Mailing Address P.O. BOX 1444

City  
COEBURNState  
VAZip Code  
24230-1444FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LONE PINE EXTERMINATING CO., INC.Occupation (for Individual)  
PEST CONTROL OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653608**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANTOSIEWICZ, KAZ, ,**

Mailing Address 3 AUTUMN STREET

City  
SPRINGFIELDState  
VTZip Code  
05156-3402FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.08

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652792**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AULICH, KENNETH, RICHARD, MR.,**

Mailing Address 705 VZ COUNTY ROAD 3211

City  
WILLS POINTState  
TXZip Code  
75169-7115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652925**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1033 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AULT, ROBERT, , ,**

Mailing Address 521 CANYON WAY

City  
MESQUITEState  
NVZip Code  
89027-3714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KELLER WILLIAMSOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652312**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AULT, ROBERT, , ,**

Mailing Address 521 CANYON WAY

City  
MESQUITEState  
NVZip Code  
89027-3714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KELLER WILLIAMSOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652313**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BABCOCK, PAUL, , ,**

Mailing Address 3 MEADOWBROOK WAY

City  
SAG HARBORState  
NYZip Code  
11963-1301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651421**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

245.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1034 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAINES, KEVIN, H., MR.,**

Mailing Address 457 S MARENGO AVE. UNIT 21

City  
PASADENAState  
CAZip Code  
91101-3937FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JPL/CALTECHKEVIN BAINESOccupation (for Individual)  
RESEARCH SCIENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.10

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652483**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAMERT, TOM, , ,**

Mailing Address BOX 336

City  
IONEState  
CAZip Code  
95640-0336FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1402.91

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651820**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARR, CHARLES, , MR.,**

Mailing Address P.O. BOX 98

City  
NACHESState  
WAZip Code  
98937-0098FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TRIUMPH AEROSPACEOccupation (for Individual)  
CNC LEAD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.80

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651923**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

157.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1035 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEAVER, MORRIS, T., ,**

Mailing Address 2868 DRAKE AVE

City  
COSTA MESAState  
CAZip Code  
92626-5804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.42

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652589**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BECK, ARNOLD, A., MR.,**

Mailing Address 300 FREDRICKSBURG CT. NE

City  
NORTH CANTONState  
OHZip Code  
44720-2575FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.06

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651684**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BECKWITH, ART, , MR.,**

Mailing Address P.O. BOX 1029, 507 BUS.

City  
PROGRESOState  
TXZip Code  
78579-1029FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.05

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653122**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

154.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1036 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BELL, BONNIE, , ,**

Mailing Address 778 1ST ST NW

City  
SAINT PAULState  
MNZip Code  
55112-3216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651483

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEST, SAMMY, L., ,**

Mailing Address 1807 FM 3240

City  
BANDERAState  
TXZip Code  
78003-5233FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652062

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEST, SAMMY, L., ,**

Mailing Address 1807 FM 3240

City  
BANDERAState  
TXZip Code  
78003-5233FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1027.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652066

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.47



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1037 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEST, SAMMY, L., ,**

Mailing Address 1807 FM 3240

City  
BANDERAState  
TXZip Code  
78003-5233FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.21

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652070**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BESWICK, JANE, ELIZABETH, MS.,**

Mailing Address PO BOX 153

City  
FRENCH CAMPState  
MSZip Code  
39745-0153FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.88

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651317**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653404**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1038 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BINGHAM, GLENN, S., MR.,**

Mailing Address 721 STEWARTS RD

City  
LANEXAState  
VAZip Code  
23089-8804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651926**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652706**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLACK, ROBERT, B., MR.,**

Mailing Address 65 SOUTH BATTERY

City  
CHARLESTONState  
SCZip Code  
29401-2325FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1308.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652634**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

546.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1039 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLANKENSHIP, KATHY, , ,**

Mailing Address 125 ORCHARD DR.

City  
ELIDAState  
OHZip Code  
45807-1084FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653165

Amount of Each Receipt this Period

17.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLAUVELT, BARBARA, , ,**

Mailing Address PO BOX 832

City

LAKE WALES

State

FL

Zip Code

33859-0832

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651509

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City

FORT PAYNE

State

AL

Zip Code

35967-5145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

343.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652942

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

126.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1040 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BODAK, LOUISE, , ,**

Mailing Address 2087 W JESTER WAY

City  
POST FALLSState  
IDZip Code  
83854-8191FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652144**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BODAK, LOUISE, , ,**

Mailing Address 2087 W JESTER WAY

City  
POST FALLSState  
IDZip Code  
83854-8191FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652869**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUGHER, ARTHUR KENNETH, , ,**

Mailing Address 103 CIRCLE DR

City  
MAYFIELDState  
KYZip Code  
42066-6902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
OLD HICKORY CLAY COOccupation (for Individual)  
TECHNICAL DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

311.53

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652235**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1041 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOWLER, DONALD, , ,**

Mailing Address PMB 8089

City  
SISTERSState  
ORZip Code  
97759-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.30

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653562**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOWMAN, JAMES, , , JR.**

Mailing Address 315, MAIN ST S STE 309

City  
MINOTState  
NDZip Code  
58701-3956FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.73

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652492**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOWMAN, ROSEMARIE, , ,**

Mailing Address 233 MCLEOD AVE

City  
MISSOULAState  
MTZip Code  
59801-4303FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

385.29

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652146**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

240.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1042 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRECHER, MICHAEL, , ,**Mailing Address 7153 PROMENADE DRIVE  
D201City  
BOCA RATONState  
FLZip Code  
33433-6947FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.57

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652232**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRODERICK, FRANCIS, , ,**

Mailing Address 16 DUCK POND LN

City  
RAMSEYState  
NJZip Code  
07446-1643FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.43

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651492**

Amount of Each Receipt this Period

2.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.45

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651747**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1043 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.45

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652722**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUNN, DANIEL, W., MR.,**

Mailing Address P.O. BOX 5005 PMB 116

City  
RANCHO SANTA FEState  
CAZip Code  
92067-5005FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DANIEL W. BUNNOccupation (for Individual)  
INVESTORS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.74

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652807**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURGIN, JAMES, A., MR.,**

Mailing Address 23030 WELBOURNE WALK CT

City  
ASHBURNState  
VAZip Code  
20148-1747FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.79

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651807**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1044 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURNS, MICHAEL, J., ,**

Mailing Address 7287 HORIZON DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653158**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUSTARD, ANN, , ,**

Mailing Address 4512 GREENVIEW RD.

City  
TRENT WOODSState  
NCZip Code  
28562-7634FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651961**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CABREJA, FELIX, , ,**

Mailing Address 510 4TH STREET, HOUSE

City  
PALISADES PARKState  
NJZip Code  
07650-2316FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652636**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.19



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1045 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651403

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651404

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651405

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1046 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27651408

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27651413

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27651415

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1047 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651419**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651579**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651710**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1048 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNES, CALLAND, , ,**

Mailing Address 11078 SAFFOLD WAY

City  
RESTONState  
VAZip Code  
20190-3812FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.30

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653185**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTINO, MARTIN, , ,**

Mailing Address 1192 NORTH HIGH STR

City  
EAST HAVENState  
CTZip Code  
06512-1022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652658**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651774**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1049 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652839**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARR, RICHARD, , ,**

Mailing Address 8608 CROSSWIND DR.

City  
FORT WORTHState  
TXZip Code  
76179-3011FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DCSGINC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653041**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARRERA, ELINOR, , ,**

Mailing Address 12640 SUNNYDALE DRIVE

City  
WELLINGTONState  
FLZip Code  
33414-6294FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653183**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

157.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1050 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARY, KATHARINE, L., MRS.,**

Mailing Address 276 NORTHLAKE DR.

City  
COLDWATERState  
MIZip Code  
49036-8661FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651770**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652291**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652916**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1051 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CERNUDA, HERMINIO, L., MR.,**

Mailing Address 5320 SW 5TH TER

City  
CORAL GABLES

State  
FL

Zip Code  
33134-1126

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

**Transaction ID : SA11A.27651964**

Amount of Each Receipt this Period

12.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHAMBERLIN, CLINT, , ,**

Mailing Address 1519 5TH AVENUE WEST

City  
WILLISTON

State  
ND

Zip Code  
58801-3903

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

**Transaction ID : SA11A.27653476**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHING

State  
NY

Zip Code  
11355-1044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

**Transaction ID : SA11A.27651754**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

97.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1052 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANH, HANH, , ,**

Mailing Address 12 SHAMROCK COURT

City  
SPRINGFIELDState  
MAZip Code  
01108-1222FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTFIELD NAILS SPAOccupation (for Individual)  
NAIL TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653153**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHAPMAN, BETTY, , ,**

Mailing Address 2705 HARTWOOD DRIVE

City  
FORT WORTHState  
TXZip Code  
76109-1234FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651312**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAVERA, OFILIA, , ,**

Mailing Address 3100 TWISTED CREEK

City  
SAN ANTONIOState  
TXZip Code  
78230-4046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1048.13

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653571**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

324.55



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1053 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHAVERA, OFILIA, , ,**

Mailing Address 3100 TWISTED CREEK

City  
SAN ANTONIOState  
TXZip Code  
78230-4046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1048.13

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653589**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHAVERA, OFILIA, , ,**

Mailing Address 3100 TWISTED CREEK

City  
SAN ANTONIOState  
TXZip Code  
78230-4046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1048.13

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653596**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652635**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

39.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1054 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652643**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652644**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652646**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1055 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652647**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652649**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLARK, BARBARA, W., MRS.,**

Mailing Address 1170 GORDON COMBS RD NW

City  
MARIETTAState  
GAZip Code  
30064-1226FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ELEGANT IDEAS INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

562.22

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651414**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1056 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLARK, BARBARA, W., MRS.,**

Mailing Address 1170 GORDON COMBS RD NW

City  
MARIETTAState  
GAZip Code  
30064-1226FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ELEGANT IDEAS INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651417

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, RICKEY, , ,**

Mailing Address 2157 N FARM ROAD 197

City  
SPRINGFIELDState  
MOZip Code  
65802-9285FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653045

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COKER, ELIZABETH, , ,**

Mailing Address P O BOX 201

City  
TURBEVILLEState  
SCZip Code  
29162-0201FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653329

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1057 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLEMAN, KATHLEEN, , ,**

Mailing Address 7348 SECREST CT

City  
ARVADAState  
COZip Code  
80007-7621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652829**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONSTANTINE, RUSSELL, , ,**

Mailing Address 209 ROBIN HOOD DR

City  
COVINGTONState  
LAZip Code  
70433-4762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652095**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONSTANTINE, RUSSELL, , ,**

Mailing Address 209 ROBIN HOOD DR

City  
COVINGTONState  
LAZip Code  
70433-4762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652101**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1058 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COONLY, JOHN, , ,**

Mailing Address 300 WEST AVE APT 2326

City  
AUSTINState  
TXZip Code  
78701-3808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.28

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651890**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CORNELIUSON, KAYE, , ,**

Mailing Address 5456 N WOODSON AVENUE

City  
FRESNOState  
CAZip Code  
93711-2548FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PHILIP P CORNELIUSONOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.98

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653610**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COTTON, JOHN, , ,**

Mailing Address PO BOX 953

City  
WILLIAMSBURGState  
MAZip Code  
01096-0953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652886**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

322.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1059 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COVEY, BOBBY, , ,**

Mailing Address 17110 LEDGEFIELD

City  
CYPRESSState  
TXZip Code  
77433-2062FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.13

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653380**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRESPO, VALERIE, , ,**

Mailing Address 8609 E THOROUGHbred TRAIL

City  
SCOTTSDALEState  
AZZip Code  
85258-1411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RFW MARKET SERVICESOccupation (for Individual)  
PROJECT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.23

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653543**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRESPO, VALERIE, , ,**

Mailing Address 8609 E THOROUGHbred TRAIL

City  
SCOTTSDALEState  
AZZip Code  
85258-1411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RFW MARKET SERVICESOccupation (for Individual)  
PROJECT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

612.23

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653544**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1060 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRESPO, VALERIE, , ,**

Mailing Address 8609 E THOROUGHbred TRAIL

City  
SCOTTSDALEState  
AZZip Code  
85258-1411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RFW MARKET SERVICESOccupation (for Individual)  
PROJECT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653546

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CULBERT, JOSEPH, , ,**

Mailing Address 155 PRESCOTT AVE

City  
STATEN ISLANDState  
NYZip Code  
10306-3216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652972

Amount of Each Receipt this Period

70.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CUNNINGHAM, JACQUELINE, , ,**

Mailing Address 1203 MCCLEARY TER APT 208

City  
BEL AIRState  
MDZip Code  
21014-4547FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651763

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

196.23



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1061 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURTIN, DINO, ALLEN, MR.,**

Mailing Address 228 U ST

City  
RIO LINDAState  
CAZip Code  
95673-1337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1405.40

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652574**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DATTA, TINA, , ,**

Mailing Address 2102 FORGE RD

City  
SANTA BARBARAState  
CAZip Code  
93108-2238FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653399**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.68

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652367**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1062 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.68

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653363**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAVIS, NANCY, , ,**

Mailing Address 9410 SE 174TH LOOP

City  
SUMMERFIELDState  
FLZip Code  
34491-6457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.32

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652149**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DERDA, JOHN, , ,**

Mailing Address 1195 W BERTRAND RD

City  
NILESState  
MIZip Code  
49120-8772FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CABINETMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652562**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.15

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1063 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DESSAUER, MARILYNN, , ,**

Mailing Address 8679 BLUE FLAG WAY

City  
NAPLES

State  
FL

Zip Code  
34109-4300

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.61

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

**Transaction ID : SA11A.27652994**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIMARIO, JAMES, , ,**

Mailing Address 7657 WINNETKA AVE

City  
WINNETKA

State  
CA

Zip Code  
91306-2677

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
PROPERTY MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.82

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

**Transaction ID : SA11A.27653274**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DINIVAH, MURTY, , ,**

Mailing Address 5602 MUMFORD PATH

City  
SAN ANTONIO

State  
TX

Zip Code  
78228-3528

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARMY

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.90

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

**Transaction ID : SA11A.27653606**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

85.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1064 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIONNE, DOUGLAS, , ,**

Mailing Address 6122 WINDY KNL

City  
WINDCRESTState  
TXZip Code  
78239-2655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.40

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653318**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOUGLAS, BILL, , ,**

Mailing Address 10900 ROAD 20

City  
CORTEZState  
COZip Code  
81321-8737FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EXPANSION SPECIALTIES, INCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652918**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DRINNON, PAUL, T., MR.,**

Mailing Address 9346 KATHI CREEK DR.

City  
COLORADO SPRINGSState  
COZip Code  
80924-2110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.30

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651424**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

173.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1065 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DRONE, DARLENE, , ,**

Mailing Address 11700 SOUTHWIND RD

City  
RIDGWAYState  
ILZip Code  
62979-2424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.96

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651613**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRONE, DARLENE, , ,**

Mailing Address 11700 SOUTHWIND RD

City  
RIDGWAYState  
ILZip Code  
62979-2424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.96

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652142**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUFFY, GERARD, , ,**

Mailing Address 39 BAYBERRY LN

City  
MIDDLETOWNState  
NJZip Code  
07748-1424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

801.69

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652804**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1066 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUKE, DAVID, , ,**

Mailing Address 31395 AVENIDA DEL REPOSO

City  
TEMECULAState  
CAZip Code  
92591-1780FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652162**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNCAN, ALBERT, , ,**

Mailing Address 3318 DAWN DR

City  
MIDLANDState  
MIZip Code  
48642-4091FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653351**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNHAM, VICTORIA, , ,**

Mailing Address PO BOX 517

City  
RIDGEFIELDState  
WAZip Code  
98642-0517FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

498.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652390**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1067 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EADES, LINDA, , ,**

Mailing Address 14250 STATE ROUTE JJ

City  
WEST PLAINSState  
MOZip Code  
65775-5834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.55

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651610**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EADES, LINDA, , ,**

Mailing Address 14250 STATE ROUTE JJ

City  
WEST PLAINSState  
MOZip Code  
65775-5834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.55

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651615**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EADES, LINDA, , ,**

Mailing Address 14250 STATE ROUTE JJ

City  
WEST PLAINSState  
MOZip Code  
65775-5834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.55

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651616**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1068 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EADES, LINDA, , ,**

Mailing Address 14250 STATE ROUTE JJ

City  
WEST PLAINSState  
MOZip Code  
65775-5834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.55

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651620**

Amount of Each Receipt this Period

12.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651644**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EAVES, DARRYL, , ,**

Mailing Address 7700 ELTON ST

City  
SAINT LOUISState  
MOZip Code  
63123-3806FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.86

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651716**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.47



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1069 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-6174FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652533

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EDWARDS, KEVIN, , ,**

Mailing Address 6153 FAIRLAWN DRIVE SW

City  
LAKEWOODState  
WAZip Code  
98499-2433FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRANSERVICE LOGISTICSOccupation (for Individual)  
COMMERCIAL DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651801

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELDAR, LUE ANN, , ,**

Mailing Address 1632 HARMON COVE TOWER

City  
SECAUCUSState  
NJZip Code  
07094-1766FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMAZONOccupation (for Individual)  
E-COMMERCE OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653458

Amount of Each Receipt this Period

10.81

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1070 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENGLISH, SHERRY, , ,**

Mailing Address 15815 BOOTH CIR

City  
VOLENTEState  
TXZip Code  
78641-6018FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652190**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EVANS, LINDA, , ,**

Mailing Address 130 CRESCENT AVE. #306

City  
SUNNYVALEState  
CAZip Code  
94087-2765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651523**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653006**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1071 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FALLON, JOHN, , ,**

Mailing Address 2702 DOUGLAS AVE  
#125

City  
DALLAS

State  
TX

Zip Code  
75219-3456

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.10

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

**Transaction ID : SA11A.27652638**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FEIGENBAUM, ROBERT, , MR.,**

Mailing Address 339 AVALON DRIVE

City

SOUTH SAN FRANCISCO

State

CA

Zip Code

94080-5604

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COVENANT AVIATION SECURITY

Occupation (for Individual)  
TRANSPORTATION SECURITY OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.40

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

**Transaction ID : SA11A.27652534**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City

NORTHFIELD

State

OH

Zip Code

44067-1604

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

**Transaction ID : SA11A.27653396**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

84.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1072 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FERNANDEZ, RODRIGO, J., MR.,**

Mailing Address 641 COUNTRY CLUB LANE

City  
CORONADOState  
CAZip Code  
92118-2035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.86

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653001**

Amount of Each Receipt this Period

124.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FILIPSKI, DARLA, , ,**

Mailing Address 3903 PRESTON CT

City  
NORMANState  
OKZip Code  
73072-5019FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.21

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651824**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISHER, PAMELA, , ,**

Mailing Address 1565 LONGS GAP RD

City  
CARLISLEState  
PAZip Code  
17013-8658FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1016.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652964**

Amount of Each Receipt this Period

22.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

222.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1073 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISK, V., RONALD, MR.,**

Mailing Address 41320 FOX RUN ROAD

City  
NOVIState  
MIZip Code  
48377-5111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.33

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27651683

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLANAGAN, MICHAEL, , ,**

Mailing Address 2150 EAST WELLINGTON AVENUE

City

SANTA ANA

State

CA

Zip Code

92701-3184

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.05

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27653068

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLICKENSCHILD, CONRAD, W., MR.,**

Mailing Address 6 LINDEN DRIVE

City

WALDEN

State

NY

Zip Code

12586-1308

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

534.36

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27653346

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1074 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORSTER, KATHY, , MS.,**

Mailing Address 712 LA MARITE DR

City  
MANCHESTERState  
MOZip Code  
63021-7014FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SSMOccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651853**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652031**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

917.57

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652065**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

21.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1075 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRANK, ANDREW, , ,

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653003

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRUSTACI, MARY, , ,

Mailing Address 12991 NORTHWEST 5TH COURT

City  
PEMBROKE PINESState  
FLZip Code  
33028-3120FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MDCPSOccupation (for Individual)  
SUBSTITUTE TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653397

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GALLO, ELAINE, , ,

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653042

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

69.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1076 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GHAZIL, JAMES, A., DR.,**

Mailing Address 3028 JAMACHA VIEW DR

City  
EL CAJONState  
CAZip Code  
92019-5135FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.90

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27651727

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIBBS, CAROL, , ,**

Mailing Address 599 INDEPENDENCE AVE

City  
CHASKAState  
MNZip Code  
55318-3203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.06

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27652724

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILL, LAWRENCE, , ,**

Mailing Address POB 176

City  
ABILENEState  
TXZip Code  
79604-0176FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MATTHEWS OFCOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.64

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27652039

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.73



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1077 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIORDANO, MICHAEL, , ,**

Mailing Address 59 YOWAGO AVE

City  
BRANFORDState  
CTZip Code  
06405-5526FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIORDANOOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3029.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652650**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLENN, JAMES, , ,**

Mailing Address 728 W TAYLOR RD

City  
LAS CRUCESState  
NMZip Code  
88007-5303FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653098**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRABER, GARY, , MR.,**

Mailing Address 9927 TERRITORY LN

City  
HOUSTONState  
TXZip Code  
77064-5227FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653148**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1078 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652074

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652075

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAYBASH, PETER, J., MR., JR.**

Mailing Address 4 CAMBRIDGE DR.

City  
HERSHEYState  
PAZip Code  
17033-2100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651814

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1079 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREENWOOD, KEITH, , ,**

Mailing Address 1250 S SANDBRANCH

City  
MOUNT HOPEState  
WVZip Code  
25880-9068FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PLUMBER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.56

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651617**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, MICHAEL, , ,**

Mailing Address 750 NEWPORT CIR

City  
REDWOOD CITYState  
CAZip Code  
94065-1907FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.50

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653118**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

623.45

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651647**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

347.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1080 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROESBECK, TED, , ,**

Mailing Address 5760 LEGACY DR

City  
PLANOState  
TXZip Code  
75024-7102FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651988**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROUND, JIM, , ,**

Mailing Address 9791 E DREYFUS AVE

City  
SCOTTSDALEState  
AZZip Code  
85260-4450FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.83

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652799**

Amount of Each Receipt this Period

38.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUDORF, KENNETH, , ,**

Mailing Address 970 CAPE MARCO DR.

City  
MARCO ISLANDState  
FLZip Code  
34145-6399FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1716.06

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653263**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

242.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1081 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HACKL, MARK, , ,**

Mailing Address 485 HICKORY NUT AVE

City  
OLDSMARState  
FLZip Code  
34677-2016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651809**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HADLEY, GARY, , ,**

Mailing Address 5616 BUENA VISTA DR.

City  
FRISCOState  
TXZip Code  
75034-2259FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LEARNING ENTERPRISES LLCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652366**

Amount of Each Receipt this Period

150.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HALL, OLLABELLE, , MRS.,**

Mailing Address 3603 MEADOW LAKE LANE

City  
HOUSTONState  
TXZip Code  
77027-4110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651477**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

285.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1082 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMLIN, DENNIS, , ,**

Mailing Address 18735 CORSINI DRIVE

City  
SAN ANTONIOState  
TXZip Code  
78258-1629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.04

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652032**

Amount of Each Receipt this Period

19.26

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMLIN, DENNIS, , ,**

Mailing Address 18735 CORSINI DRIVE

City  
SAN ANTONIOState  
TXZip Code  
78258-1629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.04

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652118**

Amount of Each Receipt this Period

28.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HANSON, BOB, , ,**

Mailing Address 1326 HICKORYCREEK CT.

City  
WICHITAState  
KSZip Code  
67235-7000FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WEIGAND OMEGA MGTOccupation (for Individual)  
PROPERTY MGT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

841.35

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651810**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

68.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1083 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARMON, DON, , ,**

Mailing Address 1717 EPPING AVE

City  
MODESTOState  
CAZip Code  
95355-7859FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.96

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651930**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652370**

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652373**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

52.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1084 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652375**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAWKINS, JUANITA, , MS.,**

Mailing Address 40 VANDERVEER DR.

City  
BASKING RIDGEState  
NJZip Code  
07920-3746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652930**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAYDEN, AMANDA, , ,**

Mailing Address 6 RED BARN ROAD

City  
HYDE PARKState  
NYZip Code  
12538-1941FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651551**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.27



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1085 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAYDEN, AMANDA, , ,**

Mailing Address 6 RED BARN ROAD

City  
HYDE PARKState  
NYZip Code  
12538-1941FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.90

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651554**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAYDEN, MARILYN, J., MS.,**

Mailing Address 10306ME. CALLE DE LAS BRISAS

City  
SCOTTSDALEState  
AZZip Code  
85255-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653221**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAYES, DELMORE, G., MR.,**

Mailing Address 81862 SUN CACTUS LN

City  
LA QUINTAState  
CAZip Code  
92253-7745FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.47

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652112**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1086 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HESTER, DON, , ,**

Mailing Address 3981 F. ST.

City  
EUREKAState  
CAZip Code  
95503-6003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.79

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653050**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HIEBERT, CHARLYN, , ,**

Mailing Address 4334 YORK BLVD

City  
LOS ANGELESState  
CAZip Code  
90041-3220FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NPOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.99

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652023**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIEBERT, CHARLYN, , ,**

Mailing Address 4334 YORK BLVD

City  
LOS ANGELESState  
CAZip Code  
90041-3220FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NPOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.99

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653169**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1087 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651953**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOBBS, JAMES, , ,**

Mailing Address 1185 BULLFROG RD

City  
FAIRFIELDState  
PAZip Code  
17320-9156FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
WELDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652353**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOBLIT, SUSAN, , ,**

Mailing Address 2193 1900TH AVENUE

City  
ATLANTAState  
ILZip Code  
61723-9123FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

332.50

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651797**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

195.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1088 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOISINGTON, JACKIE, , ,**

Mailing Address 2625 W RELATION ST

City  
SAFFORDState  
AZZip Code  
85546-4047FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOOPNER ENERGYOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.74

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652570**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLINGTON, MARGARET, , ,**

Mailing Address 9960 ATRIUM WAY APT 514

City  
JACKSONVILLEState  
FLZip Code  
32225-6447FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.13

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652100**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLTEN, JAMES, J., MR.,**

Mailing Address 4003 CHESTNUT OAK DR

City  
SMITHTONState  
ILZip Code  
62285-3741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1366.44

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653233**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1089 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLUB, LORRAINE, , ,**

Mailing Address 58 DOVE CT

City  
CLOVERDALEState  
VAZip Code  
24077-3050FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652374**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HORN, MICHAEL, J., MR.,**

Mailing Address 5055 VAN SICKLE

City  
FLAGSTAFFState  
AZZip Code  
86001-3829FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653139**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOWARD, VICTOR, , ,**

Mailing Address 616 BRIDGEMAN LN

City  
ROMEDEVILLEState  
ILZip Code  
60446-5195FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652825**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

312.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1090 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652540

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBBARD, BARBARA, A., MS.,**

Mailing Address P.O. BOX 1736

City  
LAS CRUCESState  
NMZip Code  
88004-1736FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652139

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBBARD, BARBARA, A., MS.,**

Mailing Address P.O. BOX 1736

City  
LAS CRUCESState  
NMZip Code  
88004-1736FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

734.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652461

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

94.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1091 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUTCHINSON, ROBERT, , ,**

Mailing Address 37 WHIPOWILL BEND

City  
THOMASVILLEState  
GAZip Code  
31757-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653484**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUVAL, TERRY, , ,**

Mailing Address 136 SHELBY OAKS LANE

City  
LAFAYETTEState  
LAZip Code  
70507-5800FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652246**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652343**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1092 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. INABINET, DEBORAH, O., ,**

Mailing Address 4939 VICTORIA AVENUE

City  
NORTH CHARLESTONState  
SCZip Code  
29405-4223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.01

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651301**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. INABINET, DEBORAH, O., ,**

Mailing Address 4939 VICTORIA AVENUE

City  
NORTH CHARLESTONState  
SCZip Code  
29405-4223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.01

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651310**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACKSON, DEB., , ,**

Mailing Address 3180 PEAR ORCHARD ROAD

City  
GRANBURYState  
TXZip Code  
76048-6817FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

516.40

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651680**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

138.49



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1093 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACKSON, JOHNNIE, , ,**

Mailing Address 18240 SOUTHWEST FLORENCE STREET

City  
BEAVERTONState  
ORZip Code  
97078-1624FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.64

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651342**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACOBS, MICHAEL, , ,**Mailing Address 3 WHITE OAK DR.  
APT CCity  
SMITHFIELDState  
NCZip Code  
27577-4872FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.34

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652326**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

633.79

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652951**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.11

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1094 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, BERNICE, , ,**

Mailing Address **55 MELROY AVE**  
**APT 215**

City  
**BUFFALO**

State  
**NY**

Zip Code  
**14218-1660**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**384.22**

Date of Receipt

**02 / 05 / 2025**

**Transaction ID : SA11A.27651341**

Amount of Each Receipt this Period

**34.65**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, BERNICE, , ,**

Mailing Address **55 MELROY AVE**  
**APT 215**

City  
**BUFFALO**

State  
**NY**

Zip Code  
**14218-1660**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**384.22**

Date of Receipt

**02 / 05 / 2025**

**Transaction ID : SA11A.27653134**

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNS, PATRICIA, D., ,**

Mailing Address **P. O. BOX 7**

City  
**SAULSBURY**

State  
**TN**

Zip Code  
**38067-0007**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**398.40**

Date of Receipt

**02 / 05 / 2025**

**Transaction ID : SA11A.27652854**

Amount of Each Receipt this Period

**3.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**72.65**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1095 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNS, PATRICIA, D., ,

Mailing Address P. O. BOX 7

City  
SAULSBURYState  
TNZip Code  
38067-0007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652856

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, PATRICIA, D., ,

Mailing Address P. O. BOX 7

City  
SAULSBURYState  
TNZip Code  
38067-0007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652859

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, PATRICIA, D., ,

Mailing Address P. O. BOX 7

City  
SAULSBURYState  
TNZip Code  
38067-0007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652862

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1096 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNS, PATRICIA, D., ,

Mailing Address P. O. BOX 7

City  
SAULSBURYState  
TNZip Code  
38067-0007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652863

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, PATRICIA, D., ,

Mailing Address P. O. BOX 7

City  
SAULSBURYState  
TNZip Code  
38067-0007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652867

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, PATRICIA, D., ,

Mailing Address P. O. BOX 7

City  
SAULSBURYState  
TNZip Code  
38067-0007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652870

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.07

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1097 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNS, PATRICIA, D., ,**

Mailing Address P. O. BOX 7

City  
SAULSBURY

State  
TN

Zip Code  
38067-0007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.40

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

**Transaction ID : SA11A.27652877**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, JEANNETTE, , ,**

Mailing Address 873 CRESTVIEW CIRCLE

City  
FORT LAUDERDALE

State  
FL

Zip Code  
33327-1847

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.80

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

**Transaction ID : SA11A.27652292**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWS

State  
TX

Zip Code  
79714-2010

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.20

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

**Transaction ID : SA11A.27652802**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

48.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1098 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOYCE, RICHARD, , ,**Mailing Address 1350 E NORTH ST  
LOT 84City  
CROWN POINTState  
INZip Code  
46307-6400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651396

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANTNER, JEFFREY, , ,**

Mailing Address 200 TULIPHILL ROAD

City  
TEMPLEState  
PAZip Code  
19560-9401FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CJKANT RESOURCE GROUP INCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651452

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651992

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

96.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1099 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652640

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652762

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KELEDJIAN, EDWARD, , ,**

Mailing Address 29 KINGSBOROUGH CV

City  
INVERNESSState  
ILZip Code  
60010-5432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

543.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653104

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

97.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1100 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEMPFFERT, VERNON, , ,**

Mailing Address 2724 GLADSTONE AVE

City  
ANN ARBORState  
MIZip Code  
48104-6431FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653579**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KENDRICK, WILLIAM, , ,**

Mailing Address 100 CRESCENT AVE

City  
GREENVILLEState  
SCZip Code  
29605-2813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651989**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KESSELING, GLEN, , ,**

Mailing Address 11579 AGENCY HEDRICK RD

City  
OTTUMWAState  
IAZip Code  
52501-9036FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653060**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1101 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KING, MICHAEL, , ,**

Mailing Address 13719 EASTBOURNE

City  
HOUSTONState  
TXZip Code  
77034-5316FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653340**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KINNETT, FOREST, , MR.,**

Mailing Address 1012 GLEN DAY DRIVE

City  
CLEMMONSState  
NCZip Code  
27012-9560FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652842**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.01

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653459**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

99.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1102 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.01

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653460**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.01

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653461**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.01

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653462**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6.04

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1103 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTON

State  
IL

Zip Code  
61920-9392

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.01

Date of Receipt

**02** / **05** / **2025**

**Transaction ID : SA11A.27653464**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTON

State  
IL

Zip Code  
61920-9392

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.01

Date of Receipt

**02** / **05** / **2025**

**Transaction ID : SA11A.27653466**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNOLLENBERG, ROBERT, , ,**

Mailing Address 280 CANON VIEW RD

City  
BOULDER

State  
CO

Zip Code  
80302-9429

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

359.58

Date of Receipt

**02** / **05** / **2025**

**Transaction ID : SA11A.27652013**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

41.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1104 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNOLLENBERG, ROBERT, , ,**

Mailing Address 280 CANON VIEW RD

City  
BOULDERState  
COZip Code  
80302-9429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652669**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNOWLES, KAREN, , ,**

Mailing Address 308 GRAVES DRIVE

City  
FORESTState  
VAZip Code  
24551-2622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CENTRA HEALTHOccupation (for Individual)  
SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

794.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652307**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOONTZ, LINDA, , ,**

Mailing Address 155 PARKLAND DR

City  
SALISBURYState  
NCZip Code  
28146-8205FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

357.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653333**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1105 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOVATCH, INES, E., MS.,**

Mailing Address 16537 PENDIO DR.

City  
MONTVERDEState  
FLZip Code  
34756-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652347

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRUEGER, NANCY, L., MRS.,**

Mailing Address 7105 SYLVAN LN

City  
ANDERSONState  
CAZip Code  
96007-9536FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652895

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653243

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1106 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAGERSTEDT, FRANK, , ,**

Mailing Address 83 KETCHAM AVE

City  
AMITYVILLEState  
NYZip Code  
11701-3110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652140**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANG, HELEN, L., MS.,**

Mailing Address 28 HILLSIDE RD

City  
BEACONState  
NYZip Code  
12508-4129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652259**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAYCOCK, JAMES, , ,**

Mailing Address 7628 GANNON AVENUE

City  
UNIVERSITY CITYState  
MOZip Code  
63130-2819FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENTERPRISEOccupation (for Individual)  
PART TIME DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652393**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1107 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LESAFFRE, MARY, , ,**

Mailing Address 2186 OCEAN BLVD

City  
RYEState  
NHZip Code  
03870-2741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5080.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27652219

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEVY, RICHARD, P., DR.,**

Mailing Address 2785 S MAJESTIC AVE

City  
YUMAState  
AZZip Code  
85365-1170FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOUTHWEST ONCOLOGY CENTERSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27653040

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEVY, RICHARD, P., DR.,**

Mailing Address 2785 S MAJESTIC AVE

City  
YUMAState  
AZZip Code  
85365-1170FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOUTHWEST ONCOLOGY CENTERSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

668.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27653052

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1108 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWIS, JENNY, BAUM, MS.,**

Mailing Address 3197 HARVEST MOON DRIVE

City  
PALM HARBORState  
FLZip Code  
34683-2125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FISOccupation (for Individual)  
SR. DIRECTOR PRODUCT DEVELOP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653529**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652625**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.20

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651968**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

99.85



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1109 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651979**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOGSDON, NORMAN , , ,**

Mailing Address 5940 HAVENS TRL

City  
TYLERState  
TXZip Code  
75707-6402FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TIDEWATER MARINEOccupation (for Individual)  
MARINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.58

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653360**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOGSDON, RANDALL, , ,**

Mailing Address 405 SEMINOLE PLACE

City  
LOUDONState  
TNZip Code  
37774-2114FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

437.04

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651811**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

121.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1110 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOHMAN, CAROLYN, , ,**

Mailing Address 3229 WALNUT CREEK CT

City  
BRYANState  
TXZip Code  
77807-4852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.59

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651609**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOVE, REBECCA, ANN, ,**

Mailing Address 2006 MAGNOLIA BEND

City  
BAYTOWNState  
TXZip Code  
77523-9195FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.33

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653418**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOWRY, DIANE, , ,**

Mailing Address 9 WOODRIDGE RD

City  
MOULTRIEState  
GAZip Code  
31768-5815FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

307.03

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651637**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1111 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOWRY, DIANE, , ,**

Mailing Address 9 WOODRIDGE RD

City  
MOULTRIEState  
GAZip Code  
31768-5815FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.03

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652819**

Amount of Each Receipt this Period

25.1

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUNNEY, LINDA, , ,**

Mailing Address 1064 BLUFF POINT RD

City  
NORFOLKState  
VAZip Code  
23518-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651895**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUTE, TERRY, , ,**

Mailing Address 318 LAKE ST.

City  
BRIDGE CITYState  
TXZip Code  
77611-4322FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MCFADDIN WARD INC.Occupation (for Individual)  
SECURITY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.94

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652584**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

279.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1112 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUTTENBERGER, RUDY, , ,**

Mailing Address 17426 N 2ND PL

City  
PHOENIXState  
AZZip Code  
85022-1805FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

793.30

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652177**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LYNCH, JEFFREY, , ,**

Mailing Address 5922 MAPLESHADE LN

City  
DALLASState  
TXZip Code  
75252-2353FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LYNCH LAW FIRMOccupation (for Individual)  
TRIAL LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.07

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653000**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LYNCH, JEFFREY, , ,**

Mailing Address 5922 MAPLESHADE LN

City  
DALLASState  
TXZip Code  
75252-2353FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LYNCH LAW FIRMOccupation (for Individual)  
TRIAL LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

332.07

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653012**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1113 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LYONS, GEORGE, , ,**

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534-5242FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1658.27

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652015**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LYSTIG, CAROLYN, , ,**

Mailing Address 2155 6TH LANE SE, APT 206

City  
CAMBRIDGEState  
MNZip Code  
55008-2528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.58

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652926**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MA, HOMER, , ,**

Mailing Address 1819 HAPP RD

City  
NORTHBROOKState  
ILZip Code  
60062-5640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651344**

Amount of Each Receipt this Period

0.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1114 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACAULEY, MICHAEL, , ,**

Mailing Address 1435 BOARDWALK PLACE

City  
GALLATINState  
TNZip Code  
37066-3488FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652775**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MADAVARAM, CHRISTOPHER, , ,**

Mailing Address 1310 DELL RD.

City  
NORRISTOWNState  
PAZip Code  
19403-4544FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652021**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAGUIRE, JOANNE, , MS.,**

Mailing Address 144 E 84TH ST

City  
NEW YORKState  
NYZip Code  
10028-2004FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652005**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

654.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1115 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MALAWER, MARTIN, , ,**

Mailing Address 913 FROME LN

City  
MC LEANState  
VAZip Code  
22102-2106FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653313**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARLATT, MICHAEL, , ,**

Mailing Address P.O. BOX 1299

City  
RIVERSIDEState  
CAZip Code  
92502-1299FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THOMPSON COLEGATEOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.16

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651348**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, EDWARD, S., MR.,**Mailing Address 112 MARWOOD RD  
APT 4237City  
CABOTState  
PAZip Code  
16023-2259FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1784.20

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653534**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

236.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1116 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASTRO, MABEL, , ,**

Mailing Address 4616 PRAIRIE POINT BOULEVARD

City  
KISSIMMEEState  
FLZip Code  
34746-6364FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

889.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652977

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATHEAUS, PAT, G., ,**

Mailing Address PO BOX 63810

City  
PIPE CREEKState  
TXZip Code  
78063-3810FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653407

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAY, VERN, , ,**

Mailing Address 3369 NORTH 200 WEST

City  
LEHIState  
UTZip Code  
84043-4177FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652327

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

215.54



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1117 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAYHUGH, RICHARD, , ,**

Mailing Address 1112 TREYMOUR WAY

City  
KNOXVILLEState  
TNZip Code  
37922-5165FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.93

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652498**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MC DONALD, MELODY, L., MRS.,**

Mailing Address 1098 VERNIER PLACE

City  
STANFORDState  
CAZip Code  
94305-1027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.14

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651568**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCGARRAUGH, ROBIN, , ,**

Mailing Address 12139 COUNTY RD H

City  
PERRYTONState  
TXZip Code  
79070-6333FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BADGER OPERATIONSOccupation (for Individual)  
OIL GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652159**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

228.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1118 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCKAY, HEIDI, , ,**

Mailing Address 1595 CO RD 1439

City  
SULPHUR SPRINGSState  
TXZip Code  
75482-8749FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.93

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653620**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCKAY, HEIDI, , ,**

Mailing Address 1595 CO RD 1439

City  
SULPHUR SPRINGSState  
TXZip Code  
75482-8749FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.93

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653622**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCLENDON, MARGARET, , ,**

Mailing Address 85 PHILLIPS ST.

City  
RICHLANDState  
GAZip Code  
31825-6255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

9626.40

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651982**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.31

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1119 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCLENDON, MARGARET, , ,

Mailing Address 85 PHILLIPS ST.

City  
RICHLANDState  
GAZip Code  
31825-6255FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9626.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652034

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCLENDON, MARGARET, , ,

Mailing Address 85 PHILLIPS ST.

City  
RICHLANDState  
GAZip Code  
31825-6255FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9626.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652043

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCLENDON, MARGARET, , ,

Mailing Address 85 PHILLIPS ST.

City  
RICHLANDState  
GAZip Code  
31825-6255FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

9626.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652053

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1120 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCLENDON, MARGARET, , ,**

Mailing Address 85 PHILLIPS ST.

City  
RICHLANDState  
GAZip Code  
31825-6255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9626.40

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652056**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCLENDON, MARGARET, , ,**

Mailing Address 85 PHILLIPS ST.

City  
RICHLANDState  
GAZip Code  
31825-6255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9626.40

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652058**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCLENDON, MARGARET, , ,**

Mailing Address 85 PHILLIPS ST.

City  
RICHLANDState  
GAZip Code  
31825-6255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

9626.40

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652086**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1121 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCLENDON, MARGARET, , ,**

Mailing Address 85 PHILLIPS ST.

City  
RICHLANDState  
GAZip Code  
31825-6255FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9626.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652102

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCLENDON, MARGARET, , ,**

Mailing Address 85 PHILLIPS ST.

City  
RICHLANDState  
GAZip Code  
31825-6255FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9626.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652106

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCLENDON, MARGARET, , ,**

Mailing Address 85 PHILLIPS ST.

City  
RICHLANDState  
GAZip Code  
31825-6255FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

9626.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652623

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

127.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1122 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCMULLEN, TIMOTHY, , ,**

Mailing Address 17 BAIER DR.

City  
ROCHESTERState  
NYZip Code  
14606-5311FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2025

**Transaction ID : SA11A.27651548**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEREDITH, RANDY, , ,**

Mailing Address 266 BULLFINCH ROAD

City  
MOORESVILLEState  
NCZip Code  
28117-5407FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1978.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2025

**Transaction ID : SA11A.27652071**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEREDITH, RANDY, , ,**

Mailing Address 266 BULLFINCH ROAD

City  
MOORESVILLEState  
NCZip Code  
28117-5407FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1978.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2025

**Transaction ID : SA11A.27652073**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1123 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. METHA, RONALD, , ,**

Mailing Address PO BOX1286

City  
LITCHFIELD PARKState  
AZZip Code  
85340-1286FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.64

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651636**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, JAY, P., ,**

Mailing Address 9018 GOLDEN MOUNTAIN CIRCLE

City  
BOYNTON BEACHState  
FLZip Code  
33473-3311FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NEW YORK LIFE INS COOccupation (for Individual)  
REGISTERED REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651570**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653629**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

178.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1124 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER-WHITE, MIA, , MS.,**

Mailing Address 16921 ROSE APPLE DRIVE

City  
DELRAY BEACHState  
FLZip Code  
33445-7062FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WHITE OAKS REHABILITATION AND NURSINGOccupation (for Individual)  
ADMINISTRATION CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652138**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, WARD, , ,**

Mailing Address 380 OXEN TRL

City  
FREDERICKSBURGState  
TXZip Code  
78624-6613FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.10

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651303**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLS, MICHELE, A., MRS.,**

Mailing Address 191 CAPTAIN NATHANIEL DR

City  
HANSONState  
MAZip Code  
02341-1194FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652484**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

202.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1125 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOLENDORP, DAYTON, , MR.,**

Mailing Address 6507 CASTLE KNOLL COURT

City  
INDIANAPOLISState  
INZip Code  
46250-1439FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653144**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOODY, EVAN, E., MR.,**

Mailing Address 26 CHERRY HILLS FARM DR.

City  
ENGLEWOODState  
COZip Code  
80113-7165FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MOODY INSURANCE AGENCYOccupation (for Individual)  
INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.95

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651316**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOORE, TERESA, , MS.,**

Mailing Address 9892 W CAMINO DE ORO

City  
PEORIAState  
AZZip Code  
85383-1172FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TERESA MOOREOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

424.50

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652325**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 1126 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORRIS, MIKE , , ,**

Mailing Address 578 SNAPDRAGON WAY

City  
IMPERIALState  
CAZip Code  
92251-8947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

842.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653353**

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORRICAL, PATRICIA, K., ,**

Mailing Address 5682 COUNTRY LAKES DR

City  
SARASOTAState  
FLZip Code  
34243-3811FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652404**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, RICHARD, , ,**

Mailing Address 648 E STARK DR.

City  
PALATINEState  
ILZip Code  
60074-3800FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

219.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652006**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.45

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1127 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MYRIN, ALARIK, , ,**

Mailing Address HC 65 BOX 30

City  
ALTAMONTState  
UTZip Code  
84001-9703FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652924**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEWHOUSE, BRENDA, , ,**

Mailing Address 665 S PEAR ORCHARD RD

City  
RIDGELANDState  
MSZip Code  
39157-4861FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651380**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NGUYEN, NGAI, X., DR.,**Mailing Address 696 EAST SANTA CLARA STREET  
108City  
SAN JOSEState  
CAZip Code  
95112-1911FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1564.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651596**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

380.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1128 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NINCENSKI-SATTERFIELD, JUDITH, , ,**

Mailing Address 1549 DUNDEE DR.

City  
NEW HAVENState  
INZip Code  
46774-2215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.24

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651306**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

589.96

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652328**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O' CONNOR, EDWARD, R., ,**

Mailing Address 3849 BROAD ST

City  
PHIL CAMPBELLState  
ALZip Code  
35581-3739FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653382**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1129 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O'LEARY, GREGORY, , ,**

Mailing Address 1784 N. SAN JOAQUIN STREET

City  
STOCKTONState  
CAZip Code  
95204-6016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COLLIERSOccupation (for Individual)  
INDUSTRIAL REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

746.70

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653559**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OFSTIE, NANCY, , ,**

Mailing Address 919 ORCHID POINT WAY

City  
VERO BEACHState  
FLZip Code  
32963-9518FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653389**

Amount of Each Receipt this Period

52.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLSON, PATRICIA, , ,**

Mailing Address 243 OCEANO DRIVE

City  
LOS ANGELESState  
CAZip Code  
90049-4123FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.61

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651822**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

201.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1130 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

**Transaction ID : SA11A.27651439**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

**Transaction ID : SA11A.27651440**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

**Transaction ID : SA11A.27651441**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

19.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1131 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651444**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OWENS, JAMES, , ,**

Mailing Address 132 ALRODO DR

City  
GILBERTState  
SCZip Code  
29054-9694FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CDIOccupation (for Individual)  
SUPPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.16

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652940**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OWENS, JAMES, , ,**

Mailing Address 132 ALRODO DR

City  
GILBERTState  
SCZip Code  
29054-9694FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CDIOccupation (for Individual)  
SUPPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.16

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653343**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1132 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALERMO, MARK, , ,**

Mailing Address 246 GARFIELD PL

City  
BROOKLYNState  
NYZip Code  
11215-2207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER, INVESTOR, CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651458

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PALERMINO, RONALD, , ,**

Mailing Address 64 COUNTY LINE ROAD

City  
AMITYVILLEState  
NYZip Code  
11701-3121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653498

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653191

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

117.67



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1133 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653192**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653193**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653195**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1134 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653196**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653199**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERRY JONES, JUDY, P., MS.,**Mailing Address 2950 MOUNT WILKINSON PKWY SE  
UNIT 816City  
ATLANTAState  
GAZip Code  
30339-3662FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

647.03

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652147**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

209.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1135 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORGState  
VAZip Code  
23860-8229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652747

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653284

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653309

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

46.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1136 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIERCE, ARLENE, , ,**

Mailing Address 4931 ELMGATE DR.

City  
ORCHARD LAKEState  
MIZip Code  
48324-3012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653019**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIEROTTI, ANATERESE, , MRS.,**

Mailing Address 501 BRADBURY LN

City  
GENEVAState  
ILZip Code  
60134-3645FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651779**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIEROTTI, ANATERESE, , MRS.,**

Mailing Address 501 BRADBURY LN

City  
GENEVAState  
ILZip Code  
60134-3645FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

351.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652573**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

230.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1137 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POHLE, CORTLAND, , ,**

Mailing Address 614 TATTLESBURY DR

City  
CONWAYState  
SCZip Code  
29526-2652FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651614**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.88

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652164**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRIEST, ILONA, , ,**

Mailing Address 2661 PUUONE ST

City  
KOLOAState  
HIZip Code  
96756-9570FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652777**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1138 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRINDES, JOHN, , ,**

Mailing Address 65 FARMINGTON RD

City  
SAVANNAHState  
TNZip Code  
38372-6165FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.40

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652873**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PURVIS, JAMES, E., ,**

Mailing Address 2547 JAMESTOWN ROAD

City  
BIRMINGHAMState  
ALZip Code  
35226-1423FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AC LEGG INCOccupation (for Individual)  
MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653392**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RADY, PAUL, M., MR.,**

Mailing Address 4 MOCKINGBIRD LN

City  
ENGLEWOODState  
COZip Code  
80113-4813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ANTERO RESOURCESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

8901.63

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651573**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

254.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1139 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RADY, PAUL, M., MR.,**

Mailing Address 4 MOCKINGBIRD LN

City  
ENGLEWOODState  
COZip Code  
80113-4813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ANTERO RESOURCESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8901.63

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652435**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652657**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652661**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1140 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652674**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652676**

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652680**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.22



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1141 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653424**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653425**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653429**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48.77

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1142 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RECUPERO, RITA, , ,**

Mailing Address 14000 CAROLINES COVE #101A

City  
ORMOND BEACHState  
FLZip Code  
32174-3188FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652555

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REEDY, MARY, A., MS.,**

Mailing Address 213 WOODSIDE DR

City  
CHILHOWIEState  
VAZip Code  
24319-5896FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653447

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REEDY, MARY, A., MS.,**

Mailing Address 213 WOODSIDE DR

City  
CHILHOWIEState  
VAZip Code  
24319-5896FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

460.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653448

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

64.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1143 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REEDY, MARY, A., MS.,**

Mailing Address 213 WOODSIDE DR

City  
CHILHOWIEState  
VAZip Code  
24319-5896FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.99

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653452**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652176**

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652179**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

26.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1144 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652181**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652567**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RITCHEY, GREG, , ,**

Mailing Address 5333 53 STREET N

City  
SAINT PETERSBURGState  
FLZip Code  
33709-3735FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
USPSOccupation (for Individual)  
LETTER CARRIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.08

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652214**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.89

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1145 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, HAZEL, , ,**

Mailing Address 1333 LEE ROAD 312

City  
SMITHS STATIONState  
ALZip Code  
36877-3195FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.50

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651855**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODACK, MARK, , ,**Mailing Address 16051 COLLINS AVE  
3502City  
NORTH MIAMI BEACHState  
FLZip Code  
33160-4624FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

782.88

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653335**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.78

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651502**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1146 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27651503

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27651504

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.78

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27651506

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1147 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27651508

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROTH, MARTHA, P., ,**

Mailing Address 7370 APPLERIDGE CT

City  
CINCINNATIState  
OHZip Code  
45247-5031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRIHEALTHOccupation (for Individual)  
R.N.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.52

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27652218

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROY, JOSEPHINE, , ,**Mailing Address 1 OCEAN AVE  
APT #81City  
BELMARState  
NJZip Code  
07719-2054FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WEST NEW YORK BOARD OF EDOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27652818

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

151.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1148 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652902**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653087**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652735**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.08



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1149 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUNALDUE, DONALD, , MR.,**

Mailing Address 32 PLANTATION DR.

City  
SOUTHERN PINESState  
NCZip Code  
28387-2967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653124**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651898**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RYBERG, JANICE, , MS.,**

Mailing Address 480 E CLARK AVE

City  
SANTA MARIAState  
CAZip Code  
93455-4835FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

394.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651435**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.96

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1150 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SALVINO, VICTOR, EMANUEL, ,**

Mailing Address P.O. BOX 560747

City  
DALLAS

State  
TX

Zip Code  
75356-0747

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2155.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

**Transaction ID : SA11A.27652547**

Amount of Each Receipt this Period

950.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANFAGO, RENE, , ,**

Mailing Address 11223 EWING CIRCLE SOUTH

City

MINNEAPOLIS

State

MN

Zip Code

55431-3854

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

**Transaction ID : SA11A.27651686**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAVAGE, JAMES, , ,**

Mailing Address 2530 59 WINDWARD LAKES AVE.

City

ORANGE BEACH

State

AL

Zip Code

36561-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

442.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

**Transaction ID : SA11A.27651913**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1057.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1151 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAVAGE, JAMES, , ,**

Mailing Address 2530 59 WINDWARD LAKES AVE.

City  
ORANGE BEACHState  
ALZip Code  
36561-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651917

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAVAGE, JAMES, , ,**

Mailing Address 2530 59 WINDWARD LAKES AVE.

City  
ORANGE BEACHState  
ALZip Code  
36561-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651919

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAVAGE, JAMES, , ,**

Mailing Address 2530 59 WINDWARD LAKES AVE.

City  
ORANGE BEACHState  
ALZip Code  
36561-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

442.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651925

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

75.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1152 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAVAGE, JAMES, , ,**

Mailing Address 2530 59 WINDWARD LAKES AVE.

City  
ORANGE BEACHState  
ALZip Code  
36561-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.73

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651927**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAVAGE, JAMES, , ,**

Mailing Address 2530 59 WINDWARD LAKES AVE.

City  
ORANGE BEACHState  
ALZip Code  
36561-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.73

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651932**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHAFF, JONATHAN, E., MR.,**

Mailing Address 998 OAKES BLVD

City  
SAN LEANDROState  
CAZip Code  
94577-3040FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
DELINETO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652705**

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

283.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1153 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLEIFFARTH, KAREN, , MS.,**

Mailing Address 1232 DUTCH FIELDS PKWY

City  
MIDWAYState  
UTZip Code  
84049-6931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.17

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651478**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHUNDLER, RUSSELL, , ,**

Mailing Address 26 POINT BREEZE ROAD

City

WOLFEBORO

State

NH

Zip Code

03894-4903

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653542**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHORE, LYNN, J., MRS.,**

Mailing Address P.O. BOX 6144

City

BATTLEMENT MESA

State

CO

Zip Code

81636-6144

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SADDLEBACK STORAGEOccupation (for Individual)  
MANAGER STORAGE FACILITY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.80

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651448**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1154 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.80

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651516**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.80

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651518**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

406.80

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651535**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1155 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651541

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651552

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

406.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651556

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.22

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1156 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651560

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651562

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

406.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651569

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.26



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1157 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIWIK, DEBORAH, , ,**

Mailing Address 1750 5TH STREET DR. NW

City  
HICKORYState  
NCZip Code  
28601-5206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.49

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653105**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, JOHN, , MR.,**

Mailing Address P.O. BOX 518

City  
LAKE DALLASState  
TXZip Code  
75065-0518FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651692**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, NEAL, , ,**

Mailing Address 45 OLD COTTAGE BEACH DRIVE

City  
ROCKPORTState  
TXZip Code  
78382-7769FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WELLS FARGOOccupation (for Individual)  
SEMI RETIRED FULL TIME TELLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

273.40

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651625**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1158 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNYDER, ROBERT, A., MR.,**Mailing Address 5 OLD POST RD 3  
LOT 14City  
MILLERTONState  
NYZip Code  
12546-4969FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BOOK SELLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652368**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651986**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPAETH, EDMUND, , ,**

Mailing Address 26536 LOVE LN

City  
RAMONAState  
CAZip Code  
92065-4822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

499.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652697**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1159 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPALLONE, ARLENE, , ,**

Mailing Address 5925 BRAE BURN CIR

City  
VERO BEACHState  
FLZip Code  
32967-5277FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.16

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651867**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPECHT, VIVIAN, , ,**

Mailing Address PO BOX 63

City  
LYMANState  
NEZip Code  
69352-0063FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.36

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652899**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPENCE, KATHRYN, , MS.,**

Mailing Address 1301 LARYN LN

City  
LEXINGTONState  
SCZip Code  
29072-8288FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

476.90

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653054**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1160 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STARKEY, RANDY, , ,**

Mailing Address 5700 WEBB RD

City  
HILLSBOROState  
MOZip Code  
63050-4646FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653065

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652670

Amount of Each Receipt this Period

1.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653488

Amount of Each Receipt this Period

1.83

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1161 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653494**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEIGER, JEANNE, , MS.,**

Mailing Address 877NEVADA. WYNFORD

City  
BUCYRUSState  
OHZip Code  
44820-9440FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651494**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEINMETZ, LEE, , ,**

Mailing Address POB 694

City  
TOPPENISHState  
WAZip Code  
98948-0694FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652076**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1162 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEIN, ROBERT, , ,**

Mailing Address 39 OAKLAND COURT

City  
JUPITERState  
FLZip Code  
33469-2744FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LANDSCAPE CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653174**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STERN, STEVEN, , ,**

Mailing Address 184 BRADLEY PLACE

City  
PALM BEACHState  
FLZip Code  
33480-3705FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653331**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOUT, GREGORY, , ,**

Mailing Address 1747 TOMMY AARON DR

City  
EL PASOState  
TXZip Code  
79936-4621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

392.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651864**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1163 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STUARD, KATHRYN, , ,

Mailing Address 1140 N US HWY 377

City  
JUNCTIONState  
TXZip Code  
76849-6537FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651565

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TARR, ANNE, , ,

Mailing Address 13306 SOUTHWALK

City  
SAN ANTONIOState  
TXZip Code  
78232-4843FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

987.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651832

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TARR, ANNE, , ,

Mailing Address 13306 SOUTHWALK

City  
SAN ANTONIOState  
TXZip Code  
78232-4843FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

987.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652728

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

139.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1164 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TECMIRE, EUNICE, M., ,**

Mailing Address 888 TWIN CREEKS CROSSING 308

City  
CENTRAL POINTState  
ORZip Code  
97502-5507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.97

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651328**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, BILLY, , ,**

Mailing Address P O BOX 1346

City  
MONTGOMERYState  
TXZip Code  
77356-1346FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.06

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652017**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANEState  
UTZip Code  
84737-1405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

815.62

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652652**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.21



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1165 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANEState  
UTZip Code  
84737-1405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.62

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27652656

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMSON, PAUL, , MR.,**

Mailing Address 606 CANDLEWOOD DRIVE

City  
CANON CITYState  
COZip Code  
81212-2033FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.48

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27652377

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TJADEN, PAUL, W., MR.,**

Mailing Address 9935, W GOOD HOPE RD

City  
MILWAUKEEState  
WIZip Code  
53224-3813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

243.46

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27653298

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

68.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1166 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TODD, THOMAS, R., MR.,**

Mailing Address 504 SHERWOOD DR

City  
VICTORIAState  
TXZip Code  
77901-4532FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

US CIVIL SERVICE

Occupation (for Individual)

SOCIAL SECURITY EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652274**

Amount of Each Receipt this Period

21.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRACHTMAN, KAREN, , ,**

Mailing Address 26 SCHERMERHORN ST

City  
BROOKLYNState  
NYZip Code  
11201-4803FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27651938**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRUSLER, LAURA, , ,**

Mailing Address 1 HILLVIEW COURT

City  
CORTLANDT MANORState  
NYZip Code  
10567-6411FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

HENDRICK HUDSON SCHOOL DISTRICT

Occupation (for Individual)

MONITOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

237.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27653406**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1167 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRUSLER, LAURA, , ,**

Mailing Address 1 HILLVIEW COURT

City  
CORTLANDT MANORState  
NYZip Code  
10567-6411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HENDRICK HUDSON SCHOOL DISTRICTOccupation (for Individual)  
MONITOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653421

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TUTHILL, JOHN, A., MR.,**

Mailing Address 20413 W. 56TH AVE.

City  
GOLDENState  
COZip Code  
80403-8004FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27651397

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VITALI, THEODORE, , ,**

Mailing Address 9802 WINTER NIGHT LANE

City  
SAINT LOUISState  
MOZip Code  
63126-3246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ST. LOUIS UNIVERSITYOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

529.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653324

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1168 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653097

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WAHL, MARCI, , ,**

Mailing Address 83603 CLEARLAKE ROAD

City  
FLORENCEState  
ORZip Code  
97439-8334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FRED WAHL MARINEOccupation (for Individual)  
OFFICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653232

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAHMAN, GERALD, , ,**

Mailing Address PO BOX 789

City  
ALMAState  
ARZip Code  
72921-0789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

577.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653362

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1169 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALKERSMITH, NANCY, , ,**

Mailing Address 6827 WINKLE LANE

City  
CANYONState  
MNZip Code  
55717-8712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27653091

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WARNOCK, DAN, , ,**

Mailing Address 11684 HUCKLEBERRY LOOP

City  
BAKER CITYState  
ORZip Code  
97814-7793FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.30

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27652275

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WARNOCK, DAN, , ,**

Mailing Address 11684 HUCKLEBERRY LOOP

City  
BAKER CITYState  
ORZip Code  
97814-7793FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

412.30

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27652576

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

163.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1170 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATERS, TIM, , ,**

Mailing Address 4318 WINDWILLOW LN

City  
CLERMONTState  
FLZip Code  
34714-6277FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.94

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27653077

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRISTOL MYERS SQUIBBOccupation (for Individual)  
COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27652759

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEBER, TIMOTHY, , ,**

Mailing Address 2911 EDMONT LANE

City  
NEDERLANDState  
TXZip Code  
77627-4642FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TENCARVAOccupation (for Individual)  
SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.08

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27651495

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

149.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1171 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652424

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652426

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652428

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1172 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652430**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652436**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILBUR, RICHARD, MARVIN, ,**Mailing Address 1650 MONROVIA AVE  
UNIT 213City  
COSTA MESAState  
CAZip Code  
92627-9032FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

394.79

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652610**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

248.75



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1173 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, JIMMY, O., MR.,**

Mailing Address 1075 MOTORCOACH DR

City  
POLK CITYState  
FLZip Code  
33868-5113FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.45

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652548**

Amount of Each Receipt this Period

17.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINGFIELD, REBECCA, C., MRS.,**

Mailing Address 11800 CYPRESS RD

City  
DIXONState  
MOZip Code  
65459-7212FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.75

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652529**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINGFIELD, REBECCA, C., MRS.,**

Mailing Address 11800 CYPRESS RD

City  
DIXONState  
MOZip Code  
65459-7212FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

447.75

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652532**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1174 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINGFIELD, REBECCA, C., MRS.,**

Mailing Address 11800 CYPRESS RD

City  
DIXONState  
MOZip Code  
65459-7212FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652535**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINGFIELD, REBECCA, C., MRS.,**

Mailing Address 11800 CYPRESS RD

City  
DIXONState  
MOZip Code  
65459-7212FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652536**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINGFIELD, REBECCA, C., MRS.,**

Mailing Address 11800 CYPRESS RD

City  
DIXONState  
MOZip Code  
65459-7212FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

447.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025**Transaction ID : SA11A.27652538**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1175 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINGFIELD, REBECCA, C., MRS.,**

Mailing Address 11800 CYPRESS RD

City  
DIXONState  
MOZip Code  
65459-7212FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.75

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652541**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINGFIELD, REBECCA, C., MRS.,**

Mailing Address 11800 CYPRESS RD

City  
DIXONState  
MOZip Code  
65459-7212FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.75

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652542**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINGFIELD, REBECCA, C., MRS.,**

Mailing Address 11800 CYPRESS RD

City  
DIXONState  
MOZip Code  
65459-7212FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

447.75

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652546**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

97.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1176 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27653366

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27653373

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025

Transaction ID : SA11A.27653376

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1177 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653378

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27653383

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODWARD, DEBORAH, , ,**

Mailing Address 91 NOVATAN RD S

City  
MOBILEState  
ALZip Code  
36608-9164FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11A.27652398

Amount of Each Receipt this Period

7.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1178 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODWARD, DEBORAH, , ,**

Mailing Address 91 NOVATAN RD S

City  
MOBILEState  
ALZip Code  
36608-9164FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.86

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652399**

Amount of Each Receipt this Period

52.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WROBEL, PATRICIA, , ,**

Mailing Address 6843 WESTCHESTER CIRCLE

City  
BRADENTONState  
FLZip Code  
34202-9231FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27653532**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WU, JING, , ,**Mailing Address 55 PIERREPONT ST  
APT 11MCity  
BROOKLYNState  
NYZip Code  
11201-2439FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

664.38

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652282**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1179 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WU, JING, , ,**Mailing Address **55 PIERREPONT ST**  
**APT 11M**City  
**BROOKLYN**State  
**NY**Zip Code  
**11201-2439**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**664.38**

Date of Receipt

**02 / 05 / 2025****Transaction ID : SA11A.27652287**

Amount of Each Receipt this Period

**6.00**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WU, JING, , ,**Mailing Address **55 PIERREPONT ST**  
**APT 11M**City  
**BROOKLYN**State  
**NY**Zip Code  
**11201-2439**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**664.38**

Date of Receipt

**02 / 05 / 2025****Transaction ID : SA11A.27652290**

Amount of Each Receipt this Period

**1.60**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WUERPEL, CHARLES, , ,**Mailing Address **PO 495**City  
**LAKE OSWEGO**State  
**OR**Zip Code  
**97034-**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**ANYTIME PLUMBING**Occupation (for Individual)  
**PLUMBER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**208.20**

Date of Receipt

**02 / 05 / 2025****Transaction ID : SA11A.27653095**

Amount of Each Receipt this Period

**104.10**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►**111.70**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1180 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WYANDT, YON, , ,**

Mailing Address 3739 SPRING COULEE RD

City  
BELLINGHAMState  
WAZip Code  
98226-8887FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.12

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652903**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652092**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YENSEL, PATRICIA, , ,**

Mailing Address 4811 RASPBERRY CIRCLE

City  
RAVENNAState  
OHZip Code  
44266-7843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.49

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27652630**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.87



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1181 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNGE, BRIAN, , MR.,**

Mailing Address 110 E CENTER ST

City  
MADISONState  
SDZip Code  
57042-2908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651325**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNGE, BRIAN, , MR.,**

Mailing Address 110 E CENTER ST

City  
MADISONState  
SDZip Code  
57042-2908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2025**Transaction ID : SA11A.27651751**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11C.27654572**

Amount of Each Receipt this Period

96645.30

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1182 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AGUILERA, ROBERT, A., MR.,

Mailing Address 8185 BENEVENTO DR

City  
EL DORADO HILLSState  
CAZip Code  
95762-6217FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654845

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALTIG, WILLIAM, , ,

Mailing Address 3451 WESTERN CENTER BLVD

City  
FORT WORTHState  
TXZip Code  
76137-3101FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OPTOMETRIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657167

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDERSON, CYNTHIA, , ,

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656876

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1183 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, JOHN, , ,**

Mailing Address P.O. BOX 560365

City  
ROCKLEDGEState  
FLZip Code  
32956-0365FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657075**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAILEY, ANN, , ,**

Mailing Address 104 CLUB PLACE CT

City  
WARNER ROBINSState  
GAZip Code  
31088-7551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654689**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAILEY, ANN, , ,**

Mailing Address 104 CLUB PLACE CT

City  
WARNER ROBINSState  
GAZip Code  
31088-7551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

733.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654695**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1184 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAILEY, ANN, , ,**

Mailing Address 104 CLUB PLACE CT

City  
WARNER ROBINSState  
GAZip Code  
31088-7551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.75

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654722**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAKER, JOHN, , ,**

Mailing Address 3054 HWY 223

City  
DEWITTState  
KYZip Code  
40930-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.93

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657102**

Amount of Each Receipt this Period

49.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BANGERT, MARILYN, , MRS.,**

Mailing Address 8713 US HWY 85

City  
FORT LUPTONState  
COZip Code  
80621-9309FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

447.19

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656714**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1185 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARR, JONNA, , ,**

Mailing Address 4516 WEYBRIDGE DRIVE

City  
COLUMBIAState  
MOZip Code  
65203-6429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.41

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656265**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEALS, JOSEPH, M., MR.,**

Mailing Address 45 RENAUD RD

City  
GROSSE POINTE SHORState  
MIZip Code  
48236-1741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ST. CLAIR SPECIALTY PHYSICIANSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655262**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657420**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

50.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1186 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27657421

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27657423

Amount of Each Receipt this Period

4.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.06

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27657424

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

14.45

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1187 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27657427

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27657428

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BELL, ELIZABETH, A., MS.,**

Mailing Address 2421 AMARILLO DR

City  
O FALLONState  
MOZip Code  
63368-3575FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IPCOccupation (for Individual)  
MEDICAL ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.51

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27654704

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

129.92

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1188 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BENTZ, LURA, , ,**

Mailing Address P.O. BOX 8644

City  
STOCKTON

State  
CA

Zip Code  
95208-0644

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

**Transaction ID : SA11A.27657414**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERNDT, SCOTT, , ,**

Mailing Address 3418 254TH LN

City  
LAKESIDE

State  
NE

Zip Code  
69351-5108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BERNDT CATTLE CO

Occupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

**Transaction ID : SA11A.27656381**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERRY, ROBERT, , ,**

Mailing Address P O BOX 213

City  
MARISSA

State  
IL

Zip Code  
62257-0213

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

314.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

**Transaction ID : SA11A.27656396**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

159.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1189 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERTI MAYA, ROSSANA, VESCO, ,**

Mailing Address 5345 REDONDO WAY

City  
DELRAY BEACHState  
FLZip Code  
33484-8393FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.78

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656146**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERTI MAYA, ROSSANA, VESCO, ,**

Mailing Address 5345 REDONDO WAY

City  
DELRAY BEACHState  
FLZip Code  
33484-8393FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.78

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656149**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERTI MAYA, ROSSANA, VESCO, ,**

Mailing Address 5345 REDONDO WAY

City  
DELRAY BEACHState  
FLZip Code  
33484-8393FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.78

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656150**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1190 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERTI MAYA, ROSSANA, VESCO, ,**

Mailing Address 5345 REDONDO WAY

City  
DELRAY BEACHState  
FLZip Code  
33484-8393FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.78

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656152**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERTI MAYA, ROSSANA, VESCO, ,**

Mailing Address 5345 REDONDO WAY

City  
DELRAY BEACHState  
FLZip Code  
33484-8393FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.78

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656153**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERTI MAYA, ROSSANA, VESCO, ,**

Mailing Address 5345 REDONDO WAY

City  
DELRAY BEACHState  
FLZip Code  
33484-8393FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.78

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656155**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1191 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.04

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655678**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BIVIANO, GLEN, , ,**

Mailing Address 1125 PEQUASH AVENUE

City  
CUTCHOQUEState  
NYZip Code  
11935-1451FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GJBTRANSLLCOccupation (for Individual)  
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.13

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655713**

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNEState  
ALZip Code  
35967-5145FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

343.05

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656537**

Amount of Each Receipt this Period

9.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

103.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1192 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BONIN, JUDY, , ,**

Mailing Address 187 EDGEFIELD LANE

City  
STAUNTONState  
VAZip Code  
24401-6287FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
HORSE BOARDING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.15

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655972**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BONIN, JUDY, , ,**

Mailing Address 187 EDGEFIELD LANE

City  
STAUNTONState  
VAZip Code  
24401-6287FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
HORSE BOARDING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.15

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657204**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BORGMANN, ELIZABETH, , ,**

Mailing Address 89721 HIGHWAY 121, LOT 202

City  
CROFTONState  
NEZip Code  
68730-3264FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656970**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

277.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1193 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655839**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOSMA, RACHEL, , ,**

Mailing Address 4078 SAGE SPRINGS

City  
KIMBERLYState  
IDZip Code  
83341-5370FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655895**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUCHER, PAUL, , ,**

Mailing Address 551 SW SANCTUARY DR.

City  
PORT SAINT LUCIEState  
FLZip Code  
34986-2043FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IWTOccupation (for Individual)  
PRESIDENT AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

913.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656640**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1194 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOWMAN, ROSEMARIE, , ,**

Mailing Address 233 MCLEOD AVE

City  
MISSOULAState  
MTZip Code  
59801-4303FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656759**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOX, JAMES, , MR., JR.**

Mailing Address 3810 OLD LEXINGTON RD

City  
ATHENSState  
GAZip Code  
30605-4149FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657227**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOX, JAMES, , MR., JR.**

Mailing Address 3810 OLD LEXINGTON RD

City  
ATHENSState  
GAZip Code  
30605-4149FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657228**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

118.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1195 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOYD, PAMELA, , ,

Mailing Address 3703 LAKE EDGE DRIVE

City  
SUWANEEState  
GAZip Code  
30024-7415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654769

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOYD, PAMELA, , ,

Mailing Address 3703 LAKE EDGE DRIVE

City  
SUWANEEState  
GAZip Code  
30024-7415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655075

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOYD, PAMELA, , ,

Mailing Address 3703 LAKE EDGE DRIVE

City  
SUWANEEState  
GAZip Code  
30024-7415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

411.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655137

Amount of Each Receipt this Period

14.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.07



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1196 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYD, SARA, , ,**Mailing Address 120 AZALEA LOOP  
SUITE ACity  
HORSESHOE BAYState  
TXZip Code  
78657-6205FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657299**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRACKEN, KAY, , ,**

Mailing Address 405 HAMVASY

City  
TYLERState  
TXZip Code  
75701-5324FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

BRACKEN INTEREST

Occupation (for Individual)

OIL AND GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2334.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655602**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRACKEN, KAY, , ,**

Mailing Address 405 HAMVASY

City  
TYLERState  
TXZip Code  
75701-5324FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

BRACKEN INTEREST

Occupation (for Individual)

OIL AND GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2334.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657078**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

258.20



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1197 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRADSHAW, JEANIE, , ,**

Mailing Address 251 SMOKERISE TRACE

City  
PEACHTREE CITYState  
GAZip Code  
30269-1301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654730**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BREMER, CAROL, L., MS.,**

Mailing Address 12183 DUNLAP PL

City  
CHINOState  
CAZip Code  
91710-2331FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654763**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRONSON, DORSEY, , MR.,**

Mailing Address 6 SPRING HI TRACE

City  
MOBILEState  
ALZip Code  
36608-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655867**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1198 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656307

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656514

Amount of Each Receipt this Period

18.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657378

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1199 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657387**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWNING, CHERYL, , ,**

Mailing Address 401 BRINY AVENUE # 214

City  
POMPANO BEACHState  
FLZip Code  
33062-5826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655360**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, FRANCES, P., ,**

Mailing Address 226 BLUE STONE HILLS DR.

City  
HARRISONBURGState  
VAZip Code  
22801-3411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655693**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

99.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1200 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, FRANCES, P., ,**

Mailing Address 226 BLUE STONE HILLS DR.

City  
HARRISONBURGState  
VAZip Code  
22801-3411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27655711

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, JACK, , ,**

Mailing Address 5305 THORNBROOK PKWY

City  
COLUMBIAState  
MOZip Code  
65203-9789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27654931

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, KAREN, , ,**

Mailing Address 6800 WILD RIDGE COURT

City  
PLANOState  
TXZip Code  
75024-7467FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LADIES APPAREL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.95

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27655897

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

138.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1201 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, KAREN, , ,**

Mailing Address 6800 WILD RIDGE COURT

City  
PLANOState  
TXZip Code  
75024-7467FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LADIES APPAREL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.95

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27655909

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, KAREN, , ,**

Mailing Address 6800 WILD RIDGE COURT

City  
PLANOState  
TXZip Code  
75024-7467FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LADIES APPAREL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.95

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27655911

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, KAREN, , ,**

Mailing Address 6800 WILD RIDGE COURT

City  
PLANOState  
TXZip Code  
75024-7467FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LADIES APPAREL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.95

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27655916

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1202 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, THOMAS, L., MR.,**

Mailing Address 1971 ROSE PT

City  
ATHENSState  
TXZip Code  
75752-8021FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656328**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRUNSON, JOSEPH, , ,**

Mailing Address 2000 E LAMAR, 2ND FLOOR

City  
ARLINGTONState  
TXZip Code  
76006-7346FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PROFESSIONAL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5035.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657002**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRUNSON, JOSEPH, , ,**

Mailing Address 2000 E LAMAR, 2ND FLOOR

City  
ARLINGTONState  
TXZip Code  
76006-7346FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PROFESSIONAL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5035.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657008**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5139.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1203 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITYState  
NJZip Code  
08226-2367FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656576**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUNN, KAY, , ,**

Mailing Address 1908 GAINESWOOD DR

City  
TUSCALOOSAState  
ALZip Code  
35406-3558FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656233**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURNETT, SUSAN, T., MS.,**

Mailing Address 57 HAWTHORNE AVE

City  
FLORAL PARKState  
NYZip Code  
11001-1605FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655877**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1204 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUSTARD, ANN, , ,**

Mailing Address 4512 GREENVIEW RD.

City  
TRENT WOODSState  
NCZip Code  
28562-7634FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656067

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUSTARD, ANN, , ,**

Mailing Address 4512 GREENVIEW RD.

City  
TRENT WOODSState  
NCZip Code  
28562-7634FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656087

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BYRD, FAREL, J., MR.,**

Mailing Address 986 SUGAR LANE

City  
COLLIERVILLEState  
TNZip Code  
38017-8645FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FAREL BYRD, CPA, PAOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655072

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

64.75



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1205 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654637**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CANTEY, RICHARD, , MR.,**

Mailing Address 23782 CONTINENTAL DR

City  
CANYON LAKEState  
CAZip Code  
92587-7754FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655386**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656342**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1206 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27655021

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27655486

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27656193

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1207 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656484**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CASPERSON, CAROLINA, , MS.,**

Mailing Address 100 SAINT PAUL ST, STE 700

City  
DENVERState  
COZip Code  
80206-5143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MUSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.18

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656318**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CERNUDA, HERMINIO, L., MR.,**

Mailing Address 5320 SW 5TH TER

City  
CORAL GABLESState  
FLZip Code  
33134-1126FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

358.11

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656751**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

28.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1208 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHAKNIS, GEORGE, , ,**

Mailing Address 616 SEA OATS DR

City  
DESTINState  
FLZip Code  
32541-2418FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656029

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHURCH, STEVE, , ,**

Mailing Address 711 MAPLE ST

City  
ALVAState  
OKZip Code  
73717-2743FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655606

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CIMINO, SHIRLEY, R., MS.,**

Mailing Address 44600 MONTEREY AVE. APT. A219

City  
PALM DESERTState  
CAZip Code  
92260-3368FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654708

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1209 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLAPP, WILLIAM, , MR.,**

Mailing Address 1115 COPPER MOON LANE

City  
NORTH LAS VEGASState  
NVZip Code  
89031-1910FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.56

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657010**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, STEPHEN, B., MR.,**

Mailing Address 4202 SKYLINE DR

City  
FARMINGTONState  
NMZip Code  
87401-9224FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.36

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655051**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLAVEL, ROBERT, L., MR.,**

Mailing Address 827 CARILLON DR.

City  
BARTLETTState  
ILZip Code  
60103-4596FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

718.41

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656851**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1210 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COCHRAN, JOHN, , ,**

Mailing Address 20 MIDDLE RD

City  
PALM BEACHState  
FLZip Code  
33480-4712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655932**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COFFEE, JAMES, , ,**

Mailing Address 814 COCHRAN ROAD

City  
WEATHERFORDState  
TXZip Code  
76085-6839FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657273**

Amount of Each Receipt this Period

520.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COHEN, JOEL, D., MR.,**

Mailing Address 2410 ROCHESTER RDD

City  
ROYAL OAKState  
MIZip Code  
48073-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.20

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656071**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

780.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1211 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLE, MARYANNE, E., MS.,**

Mailing Address 131 TENBURY RD

City  
LUTHERVILLE TIMONIState  
MDZip Code  
21093-6340FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654604**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLONORTIZ, JOSE, M., ,**

Mailing Address LAS AGUILAS ST.2 D-10

City  
COAMOState  
PRZip Code  
00769-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656908**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656280**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1212 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.49

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656675**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONRAD, STUART, W., MR.,**

Mailing Address 8522 FREDERICK DR.

City  
DE SOTOState  
KSZip Code  
66018-7110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655494**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONSTANTINE, RUSSELL, , ,**

Mailing Address 209 ROBIN HOOD DR

City  
COVINGTONState  
LAZip Code  
70433-4762FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.66

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655076**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1213 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONUI, MADELEINE, O., MISS,**Mailing Address 620 SAND HILL RD.  
APT 105FCity  
PALO ALTOState  
CAZip Code  
94304-2614FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656362**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COPELAND, LAMMOT, , ,**

Mailing Address P.O. BOX 1992

City  
WILMINGTONState  
DEZip Code  
19899-1992FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ASSOCIATES INTERNATIONALOccupation (for Individual)  
BUS.EXEC.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656096**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COPPLE, CLAIRE, , ,**

Mailing Address 2324 BISMARCK AVE

City  
MANTECAState  
CAZip Code  
95337-7841FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

261.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656337**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1214 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORLEY, JOHN, , ,**

Mailing Address 2505 FOXBRIDGE TERRACE

City  
THE VILLAGESState  
FLZip Code  
32162-5044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.51

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655736**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COULTER, DON, A., ,**

Mailing Address 2122 OLD FOUNDRY RD

City  
WEATHERFORDState  
TXZip Code  
76087-2107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656011**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COUNTRYMAN, BYRON, E., MR.,**

Mailing Address 5933 W. CENTURY BLVD.,

City  
LOS ANGELESState  
CAZip Code  
90045-5472FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COUNTRYMAN AND DANIELOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

385.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656515**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1215 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COWHEY, DENNIS, , ,**

Mailing Address 11861 MISTY ARBOR RUN

City  
FORT MYERSState  
FLZip Code  
33913-9417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656997**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COX, JUNE, , ,**

Mailing Address 159 NTH 4TH AVE

City  
FORSYTHState  
MTZip Code  
59327-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.74

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655637**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COX, THOMAS, , ,**

Mailing Address 120 SOUTH DEE ROAD

City  
PARK RIDGEState  
ILZip Code  
60068-3720FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ACME MACHELL COOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657156**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

95.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1216 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2025

**Transaction ID : SA11A.27655129**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2025

**Transaction ID : SA11A.27656276**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2025

**Transaction ID : SA11A.27656547**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

134.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1217 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIGO, JACQUELINE, L., MS.,**

Mailing Address 1049 SUMMIT DR

City  
MOUNT VERNONState  
OHZip Code  
43050-9576FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1371.80

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655534**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIG, JUDY, , ,**

Mailing Address 4206 S. CANTAMAR DRIVE

City  
SAINT GEORGEState  
UTZip Code  
84790-4862FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.96

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656578**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CROSBY, HAZELMAY, M., MS.,**

Mailing Address 1518 W 2500 N

City  
VERNALState  
UTZip Code  
84078-9639FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.71

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654834**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1218 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CROSBY, HAZELMAY, M., MS.,**

Mailing Address 1518 W 2500 N

City  
VERNALState  
UTZip Code  
84078-9639FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.71

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655777**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CROWLEY, DONNA, , MS.,**

Mailing Address 8 YORK LEDGE DRIVE

City

CUMBERLAND FORESID

State

ME

Zip Code

04110-1323

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.20

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655325**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CROZIER, MARILYN, , ,**

Mailing Address 11928 FARWELL ROAD

City

PHILADELPHIA

State

PA

Zip Code

19154-3419

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.22

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655539**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

54.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1219 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURRY, BERNADETTE, , ,**

Mailing Address 2000 S. ARLINGTON RIDGE RD

City  
ARLINGTONState  
VAZip Code  
22202-2119FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654995**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURRY, ROBERT, J., ,**

Mailing Address 1205 ANDTE CIR.

City  
CLAREMOREState  
OKZip Code  
74017-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656409**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DALRYMPLE, TERRANCE, D., MR.,**

Mailing Address 1851 OXFORD TRENTON RD

City  
OXFORDState  
OHZip Code  
45056-9158FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

509.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657265**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1220 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DANIELS, CAROL, B., MS.,**

Mailing Address 3091 ORCHARD RIDGE CIR

City  
DULUTHState  
GAZip Code  
30096-7422FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655351**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DANSE, ILENE, , MS.,**

Mailing Address P.O. BOX 830249

City  
RICHARDSONState  
TXZip Code  
75083-0249FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656223**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DANSE, ILENE, , MS.,**

Mailing Address P.O. BOX 830249

City  
RICHARDSONState  
TXZip Code  
75083-0249FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

569.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656252**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1221 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656238

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656249

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656251

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1222 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.68

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656255**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAVIS, EDWIN, A., MR.,**

Mailing Address 10905 EVERGREEN TER. SW

City  
LAKEWOODState  
WAZip Code  
98498-6703FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.10

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654987**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAWSON, STEPHEN, , ,**

Mailing Address 19032 W PINNACLE CIR.

City  
BATON ROUGEState  
LAZip Code  
70810-8906FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ISOMAG CORPOccupation (for Individual)  
FOUNDER CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

376.10

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654913**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1223 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAY, SHARON, , ,**

Mailing Address 85 CARTER DR.

City  
NORTH MONMOUTHState  
MEZip Code  
04265-6019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655252

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEAL, JERRY, , ,**

Mailing Address 2929 ONATE ROAD

City  
LAS CRUCESState  
NMZip Code  
88007-8117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.33

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655792

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEBERARDINIS, RALPH, , ,**

Mailing Address 2210 CLEARVIEW LANE

City  
ASTONState  
PAZip Code  
19014-1605FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

424.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657315

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1224 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEL ROSSO, NITA, , ,**

Mailing Address 3244 E WICKIEUP LN

City  
PHOENIXState  
AZZip Code  
85050-7915FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.30

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656524**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DENHOFF, DIANE, K., ,**

Mailing Address 1908 STATE ROUTE 19

City  
WELLSVILLEState  
NYZip Code  
14895-9740FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.26

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655245**

Amount of Each Receipt this Period

1.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DENHOFF, DIANE, K., ,**

Mailing Address 1908 STATE ROUTE 19

City  
WELLSVILLEState  
NYZip Code  
14895-9740FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.26

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655515**

Amount of Each Receipt this Period

1.17

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1225 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DESLONGCHAMPS, ROBERT, W., MR.,**

Mailing Address 205 E ROCKINGHAM ST

City  
ELKTONState  
VAZip Code  
22827-1503FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.08

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656329**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DESSAUER, MARILYNN, , ,**

Mailing Address 8679 BLUE FLAG WAY

City  
NAPLESState  
FLZip Code  
34109-4300FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.61

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655950**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DESTEFANO, JUDY, , ,**

Mailing Address 13280 MARSH LNDG

City  
WEST PALM BEACHState  
FLZip Code  
33418-7532FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.10

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656447**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

210.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1226 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEVERS, RONALD, , ,**

Mailing Address 2965 CHERRY BLOSSOM LOOP

City  
SAINT CLOUDState  
FLZip Code  
34771-9339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656821**

Amount of Each Receipt this Period

10.06

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DICK, DONALD, , ,**

Mailing Address 82 MAGNIFICENT LANE

City  
HEDGESVILLEState  
WVZip Code  
25427-3692FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655908**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIDOMINICIS, JUDITH, A., ,**

Mailing Address 224E SPRINGMEADOW DR.

City  
HOLBROOKState  
NYZip Code  
11741-4129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655618**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1227 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIEZ, ROBERT, A., MR.,**

Mailing Address 1111 TINSMAN RD

City  
FENTONState  
MIZip Code  
48430-1679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUPREME GEAROccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.34

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27654962

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DILGER, HERBERT, , ,**

Mailing Address 6258 N LEROY AVE

City  
CHICAGOState  
ILZip Code  
60646-4832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE PROF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.44

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27656529

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DILGER, HERBERT, , ,**

Mailing Address 6258 N LEROY AVE

City  
CHICAGOState  
ILZip Code  
60646-4832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE PROF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.44

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27657178

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

111.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1228 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOBBINS, LINDA, , ,**

Mailing Address 1000 S. MCKERN CT UNIT 120

City  
NEWBERGState  
ORZip Code  
97132-7185FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655185**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOVER, BRENDA, , ,**

Mailing Address 28656 DEER RUN ST

City  
MONTGOMERYState  
TXZip Code  
77356-3990FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOVER INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

747.83

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657100**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DRONE, DARLENE, , ,**

Mailing Address 11700 SOUTHWIND RD

City  
RIDGWAYState  
ILZip Code  
62979-2424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

712.96

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655601**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1229 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DRONE, DARLENE, , ,**

Mailing Address 11700 SOUTHWIND RD

City  
RIDGWAYState  
ILZip Code  
62979-2424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655651**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUCHAMP, CHARLES, , ,**

Mailing Address 4712 PARIS DRIVE

City  
ORANGEState  
TXZip Code  
77632-1424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654820**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUCHAMP, CHARLES, , ,**

Mailing Address 4712 PARIS DRIVE

City  
ORANGEState  
TXZip Code  
77632-1424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

301.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654821**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

69.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1230 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUCHAMP, CHARLES, , ,**

Mailing Address 4712 PARIS DRIVE

City  
ORANGEState  
TXZip Code  
77632-1424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654823

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUCHAMP, CHARLES, , ,**

Mailing Address 4712 PARIS DRIVE

City  
ORANGEState  
TXZip Code  
77632-1424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654824

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUCHAMP, CHARLES, , ,**

Mailing Address 4712 PARIS DRIVE

City  
ORANGEState  
TXZip Code  
77632-1424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

301.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654825

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1231 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUCHAMP, CHARLES, , ,**

Mailing Address 4712 PARIS DRIVE

City  
ORANGEState  
TXZip Code  
77632-1424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654826

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUCHAMP, CHARLES, , ,**

Mailing Address 4712 PARIS DRIVE

City  
ORANGEState  
TXZip Code  
77632-1424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654828

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUCHAMP, CHARLES, , ,**

Mailing Address 4712 PARIS DRIVE

City  
ORANGEState  
TXZip Code  
77632-1424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

301.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655078

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1232 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUDA, JOSEPH, , ,**

Mailing Address 7052 MERCADO LANE

City  
MELBOURNEState  
FLZip Code  
32940-7645FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655594**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DULSKI, BETHANY, , ,**

Mailing Address 40118 AZALEA DR

City  
PONCHATOULAState  
LAZip Code  
70454-6526FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RAPID MEDICAL WEIGHT LOSSOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.10

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656300**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUMAS, EDWIN, , ,**

Mailing Address 425 RUSTIC OAKS RD

City  
SEAGOVILLEState  
TXZip Code  
75159-5612FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.18

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657404**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1233 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EALER, STEVEN, , ,**

Mailing Address 806 HAMILTON STREET

City  
EASTONState  
PAZip Code  
18042-1508FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654955

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EASOW, BABU, , ,**

Mailing Address 29 INDIAN RUN

City  
EAST QUOGUEState  
NYZip Code  
11942-4947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655393

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654919

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

231.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1234 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657330**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City

PAWLEYS ISLAND

State

SC

Zip Code

29585-6174

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.64

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656353**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EDWARDS, WILL, , ,**

Mailing Address 6339 RICHMOND AVE

City

DALLAS

State

TX

Zip Code

75214-3640

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FIREHAWKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656734**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10109.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1235 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELAS BOADO, MARIO, , ,**

Mailing Address 40120 SAGEWOOD DR

City  
PALM DESERTState  
CAZip Code  
92260-2321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.43

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655445**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMI, RODERICK, MAKOTO, MR.,**

Mailing Address 2096 CORWIN RD

City  
BULLHEAD CITYState  
AZZip Code  
86442-8795FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.19

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657369**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMI, RODERICK, MAKOTO, MR.,**

Mailing Address 2096 CORWIN RD

City  
BULLHEAD CITYState  
AZZip Code  
86442-8795FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

323.19

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657370**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1236 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMI, RODERICK, MAKOTO, MR.,**

Mailing Address 2096 CORWIN RD

City  
BULLHEAD CITYState  
AZZip Code  
86442-8795FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.19

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27657371

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMI, RODERICK, MAKOTO, MR.,**

Mailing Address 2096 CORWIN RD

City  
BULLHEAD CITYState  
AZZip Code  
86442-8795FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.19

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27657373

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMI, RODERICK, MAKOTO, MR.,**

Mailing Address 2096 CORWIN RD

City  
BULLHEAD CITYState  
AZZip Code  
86442-8795FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

323.19

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27657374

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1237 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EREMITY, FRANK, , ,**

Mailing Address 12 DARTMOUTH CT

City  
STREAMWOODState  
ILZip Code  
60107-2179FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.02

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654927**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ESTEFANO, JOSE, , ,**

Mailing Address 1900 N. BAYSHORE DR.

City  
MIAMIState  
FLZip Code  
33132-3001FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RESOURCES R USOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.80

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656661**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657308**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1238 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAIRBROTHER, BETH, , ,**

Mailing Address P.O. BOX 741

City  
COMANCHEState  
TXZip Code  
76442-0741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655860

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FAIRBROTHER, BETH, , ,**

Mailing Address P.O. BOX 741

City  
COMANCHEState  
TXZip Code  
76442-0741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655864

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FANNIN, SUZAN, , MS.,**

Mailing Address 5903 85TH ST

City  
LUBBOCKState  
TXZip Code  
79424-3602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

451.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656429

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1239 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FANNIN, SUZAN, , MS.,**

Mailing Address 5903 85TH ST

City  
LUBBOCKState  
TXZip Code  
79424-3602FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.66

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656436**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.12

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657384**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISCHER, STEPHEN, M., MR.,**

Mailing Address 17520 LAKESEGE TRAIL

City  
CHAGRIN FALLSState  
OHZip Code  
44023-2115FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

832.05

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654996**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1240 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFFState  
AZZip Code  
86005-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.05

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654969**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLEMING, NORMA, , ,**

Mailing Address 414 NW KNIGHTS AVE., #613

City  
LAKE CITYState  
FLZip Code  
32055-7247FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.77

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655628**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FORT, BRENDA, , ,**

Mailing Address 3572 ALDER PL

City  
CHINO HILLSState  
CAZip Code  
91709-2007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

258.64

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657395**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1241 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORTNER, EDWARD, , ,**

Mailing Address 13477 AURORA DRIVE

City  
SAN LEANDROState  
CAZip Code  
94577-4032FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.38

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656713**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRAGO, DONNA, , MS.,**

Mailing Address 1743 N LAKESHORE DR

City  
LOUISAState  
VAZip Code  
23093-7006FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656624**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANCE, SHERROD, W., MR.,**

Mailing Address PO BOX 607

City  
RAWLINSState  
WYZip Code  
82301-0607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

977.87

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654773**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1242 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRANCE, SHERROD, W., MR.,**

Mailing Address PO BOX 607

City  
RAWLINSState  
WYZip Code  
82301-0607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

977.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654785**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRITZ, JOHN, , MR.,**

Mailing Address P.O. BOX 3115

City  
BIG BEAR LAKEState  
CAZip Code  
92315-3115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655772**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRY, RONALD, S., MR.,**

Mailing Address 709 N UNION ST

City  
NATCHEZState  
MSZip Code  
39120-2950FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655226**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1243 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FYUSCHETTO, ROCCO, , ,**

Mailing Address 1988 ROUTE 22

City  
SCOTCH PLAINSState  
NJZip Code  
07076-1014FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARGUS INVESTIGATIVEOccupation (for Individual)  
PRIVATE DETECTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655387**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656062**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GAMBRELL, MARY, , MS.,**

Mailing Address 542 JAMESON RD

City  
EASLEYState  
SCZip Code  
29640-8715FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657163**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1244 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAMBRELL, MARY, , MS.,**

Mailing Address 542 JAMESON RD

City  
EASLEYState  
SCZip Code  
29640-8715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.26

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657169**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GERSEK, BARBARA, , ,**

Mailing Address 2153 ONTARIO ROAD

City  
GREEN BAYState  
WIZip Code  
54311-5016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.28

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656541**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656543**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.93



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1245 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLENN, SAMUEL, , , JR.**Mailing Address 5490 ARBOR BRANCH DR.  
APT 234City  
SHALLOTTEState  
NCZip Code  
28470-6111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.81

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654744**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLIME, RAYMOND, , ,**Mailing Address 14750 LAKESIDE CIR  
APT 431City  
STERLING HEIGHTSState  
MIZip Code  
48313-1381FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.30

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654938**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLOVER, AVERIL, , ,**

Mailing Address 446 LANCASHIRE RUN

City  
SMITHFIELDState  
NCZip Code  
27577-8029FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.53

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654746**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1246 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOLDEN, JUDEE, , ,**

Mailing Address 11007 OLEANDER DRIVE

City  
CLERMONTState  
FLZip Code  
34711-8413FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.91

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655565**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOLDMANN, NICHOLAS, , ,**

Mailing Address PO BOX 845

City  
TEMECULAState  
CAZip Code  
92593-0845FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HP COMMUNICATIONSOccupation (for Individual)  
LINEMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.60

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656107**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, LOUISE, , ,**

Mailing Address 4075 BROOKS MILL DRIVE

City  
LITHONIAState  
GAZip Code  
30038-4143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1230.59

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657303**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

173.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1247 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, LOUISE, , ,**

Mailing Address 4075 BROOKS MILL DRIVE

City  
LITHONIAState  
GAZip Code  
30038-4143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1230.59

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657307**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOSHGARIAN, JACK, , ,**

Mailing Address 9729 CHAPEL ROAD

City  
PHILADELPHIAState  
PAZip Code  
19115-2528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655896**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOSHGARIAN, JACK, , ,**

Mailing Address 9729 CHAPEL ROAD

City  
PHILADELPHIAState  
PAZip Code  
19115-2528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

246.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655899**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1248 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOSHGARIAN, JACK, , ,**

Mailing Address 9729 CHAPEL ROAD

City  
PHILADELPHIAState  
PAZip Code  
19115-2528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655902**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOSHGARIAN, JACK, , ,**

Mailing Address 9729 CHAPEL ROAD

City  
PHILADELPHIAState  
PAZip Code  
19115-2528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655907**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.87

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655209**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

45.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1249 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655210

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655221

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655222

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1250 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655225**

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655232**

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRANZIN, SUE, , ,**

Mailing Address 2804 EMERSON LANE

City  
MIDLANDState  
TXZip Code  
79705-4201FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CHILDCARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

515.30

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655204**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1251 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAYBASH, PETER, J., MR., JR.**

Mailing Address 4 CAMBRIDGE DR.

City  
HERSHEYState  
PAZip Code  
17033-2100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655596**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREAVES, DAVID, L., MR.,**

Mailing Address 9232 SE ELDORADO WAY

City  
HOBE SOUNDState  
FLZip Code  
33455-8924FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STARR COMPANIESOccupation (for Individual)  
SR. CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657094**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREENWOOD, KEITH, , ,**

Mailing Address 1250 S SANDBRANCH

City  
MOUNT HOPEState  
WVZip Code  
25880-9068FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PLUMBER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

580.56

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656500**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1252 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, LINDA, , ,**

Mailing Address 15657 FM 244

City  
IOLAState  
TXZip Code  
77861-3867FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.70

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655452**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, LINDA, , ,**

Mailing Address 15657 FM 244

City  
IOLAState  
TXZip Code  
77861-3867FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.70

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656284**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREENWOOD, RICHARD, , ,**

Mailing Address 3170 CHATEAU RD #59

City

MAMMOTH LAKES

State  
CAZip Code  
93546-9857FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

311.10

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655083**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.62



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1253 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREMBI, JAMES, , MR.,**

Mailing Address 82 PUTTER DRIVE

City  
PALM COAST

State  
FL

Zip Code  
32164-4700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.97

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

**Transaction ID : SA11A.27655876**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREMBI, JAMES, , MR.,**

Mailing Address 82 PUTTER DRIVE

City  
PALM COAST

State  
FL

Zip Code  
32164-4700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.97

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

**Transaction ID : SA11A.27655963**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRISSOM, LINDA, , ,**

Mailing Address 1598 LEISURE WORLD

City  
MESA

State  
AZ

Zip Code  
85206-2315

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AWRC

Occupation (for Individual)  
NURSE PRACTITIONER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

351.36

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

**Transaction ID : SA11A.27656866**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1254 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROEFSEMA, GLENN, , ,**

Mailing Address 10122 87TH AVE SW

City  
LAKEWOODState  
WAZip Code  
98498-4459FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655261**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROSSMAN, ARON, , ,**

Mailing Address 2144 E 69 STREET, 2

City  
BROOKLYNState  
NYZip Code  
11234-6173FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654898**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRUENDEL, LIZ, , ,**

Mailing Address 460 COUNTY ROAD 5170

City  
SALEMState  
MOZip Code  
65560-7302FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1090.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656119**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1255 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUDORF, KENNETH, , ,**

Mailing Address 970 CAPE MARCO DR.

City  
MARCO ISLANDState  
FLZip Code  
34145-6399FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1716.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655218

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUDORF, KENNETH, , ,**

Mailing Address 970 CAPE MARCO DR.

City  
MARCO ISLANDState  
FLZip Code  
34145-6399FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1716.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655224

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUFFEE, ALICE, , ,**

Mailing Address 916 BRETT DRIVE

City  
ALLENState  
TXZip Code  
75013-8505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655517

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

162.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1256 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUMPRECHT, TOM, F., DR.,**

Mailing Address 8301 161ST AVE NE #200

City  
REDMONDState  
WAZip Code  
98052-3858FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PROLIANCE SURGEONSOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656535**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUNDERSON, TOM, , ,**

Mailing Address 1413 BAYVIEW CT

City  
BISMARCKState  
NDZip Code  
58504-7087FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656641**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUNN PHILLIPS, BEATRICE, ELVA, MS.,**

Mailing Address 16399 WATSON RD

City  
GUERNEVILLEState  
CAZip Code  
95446-8937FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

424.75

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655361**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

572.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1257 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HADDEN, MAYO, , MR.,**Mailing Address 4701 TURNBERRY LN  
UNIT 9BCity  
COLUMBUSState  
GAZip Code  
31909-8070FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.28

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655922**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HALLING, DEBRA, , ,**

Mailing Address 408 COUNTY ROAD 218

City  
SCHULENBURGState  
TXZip Code  
78956-6018FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.08

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656739**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMMONS, JOYCE, , ,**

Mailing Address 3525 NEW DELHI DR.

City  
WINSTON SALEMState  
NCZip Code  
27101-6211FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

665.27

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657375**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1258 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARPER, CINDY, , ,**

Mailing Address 4444 HALIFAX DR

City  
PORT ORANGEState  
FLZip Code  
32127-4535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656657**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRAH, TONY, , ,**

Mailing Address 355 BOXINGTON WAY

City  
SPARKSState  
NVZip Code  
89434-8904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2456.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655669**

Amount of Each Receipt this Period

83.28

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRAH, TONY, , ,**

Mailing Address 355 BOXINGTON WAY

City  
SPARKSState  
NVZip Code  
89434-8904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2456.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655673**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

219.72

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1259 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRAH, TONY, , ,

Mailing Address 355 BOXINGTON WAY

City  
SPARKSState  
NVZip Code  
89434-8904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2456.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655675

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARRAH, TONY, , ,

Mailing Address 355 BOXINGTON WAY

City  
SPARKSState  
NVZip Code  
89434-8904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2456.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655676

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARRAH, TONY, , ,

Mailing Address 355 BOXINGTON WAY

City  
SPARKSState  
NVZip Code  
89434-8904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2456.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655677

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

243.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1260 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRAH, TONY, , ,**

Mailing Address 355 BOXINGTON WAY

City  
SPARKSState  
NVZip Code  
89434-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2456.46

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655681**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRAH, TONY, , ,**

Mailing Address 355 BOXINGTON WAY

City  
SPARKSState  
NVZip Code  
89434-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2456.46

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655682**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRIS, MARY, , ,**

Mailing Address 118 KOPECKY ROAD

City  
SELMAState  
ALZip Code  
36701-6921FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.10

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656330**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

231.11



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1261 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRIS, MARY, , ,**

Mailing Address 118 KOPECKY ROAD

City  
SELMAState  
ALZip Code  
36701-6921FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.10

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656365**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, BARBARA, A., MS.,**

Mailing Address 9112 W 131ST TER.

City  
OVERLAND PARKState  
KSZip Code  
66213-3096FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.95

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655997**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657082**

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1262 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2025

**Transaction ID : SA11A.27657083**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2025

**Transaction ID : SA11A.27657084**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2025

**Transaction ID : SA11A.27657097**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1263 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657098**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657101**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657103**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1264 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657104**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657109**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657110**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1265 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARTWICK, GARY, , ,**

Mailing Address 2710 SYDNEY ST

City  
ROSWELLState  
NMZip Code  
88201-8613FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655356

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARWARD, JAMES, , ,**

Mailing Address 322 NEW KENT PLACE

City  
CARYState  
NCZip Code  
27511-4584FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656678

Amount of Each Receipt this Period

0.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAYS, GEORGE, , ,**

Mailing Address PO BOX 142

City  
YACOLTState  
WAZip Code  
98675-0299FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655392

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1266 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEBL, SHARON, , ,**

Mailing Address 111 E LEMON ST

City  
WEST BRANCHState  
IAZip Code  
52358-1100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654851

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENDERSON, MARGARET, , ,**

Mailing Address 10333 ARVIN HILL RD

City  
AUBREYState  
TXZip Code  
76227-6848FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656934

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENDERSON, MARGARET, , ,**

Mailing Address 10333 ARVIN HILL RD

City  
AUBREYState  
TXZip Code  
76227-6848FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

337.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656944

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1267 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENRY, MIKE, R., MR.,**

Mailing Address 20332 VIA ESPANA

City  
SALINASState  
CAZip Code  
93908-1260FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
J GIBBONS ASSOC.Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.94

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655031**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENRY, MIKE, R., MR.,**

Mailing Address 20332 VIA ESPANA

City  
SALINASState  
CAZip Code  
93908-1260FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
J GIBBONS ASSOC.Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.94

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655041**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENRY, SANDRA, , ,**

Mailing Address 20467 W GOOD HOPE RD

City  
LANNONState  
WIZip Code  
53046-9607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655643**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1268 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERREN, WILLIAM, E., MR.,**

Mailing Address 2201 WOODRIDGE DR

City  
JASPERState  
ALZip Code  
35504-9555FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.85

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656274**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEWITT, DIANE, , MS.,**

Mailing Address 8299 HEWITT LN

City  
EDISTO ISLANDState  
SCZip Code  
29438-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.92

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657123**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HICKS, JERRY, , ,**

Mailing Address 1261 DENALI DR, #146

City  
FESTUSState  
MOZip Code  
63028-2382FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

609.89

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655942**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.68



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1269 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654675**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655419**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655420**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1270 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655423**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654963**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654966**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1271 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.79

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654968**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.79

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654970**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.79

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654974**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1272 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIPP, CHARLES, R., ,**

Mailing Address 4226 ROBERTS RD

City  
KERSHAWState  
SCZip Code  
29067-8761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.99

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655701**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOBBS, GAYLE, , MRS.,**

Mailing Address 1 VOLK TER

City  
GREAT FALLSState  
MTZip Code  
59405-4128FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.94

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657282**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HODGE, CHUCK, , ,**

Mailing Address 10 SYLDOR LANE

City  
NOVATOState  
CAZip Code  
94947-3800FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656828**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1273 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HODGES, WILLIAM, , ,**

Mailing Address 9681 PLUM CREEK RD

City  
SEALYState  
TXZip Code  
77474-7839FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656088

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HODGES, WILLIAM, , ,**

Mailing Address 9681 PLUM CREEK RD

City  
SEALYState  
TXZip Code  
77474-7839FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656162

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLLINGSWORTH, OWEN, , ,**

Mailing Address 1517 WAGSTAFF RD

City  
PARADISEState  
CAZip Code  
95969-2829FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655339

Amount of Each Receipt this Period

171.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

217.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1274 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLMES, DON, , ,**

Mailing Address 24051 HACKBERRY CREEK CRK

City  
KATYState  
TXZip Code  
77494-2865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.42

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655435**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLMES, MATT, , ,**

Mailing Address 170 INDIAN CREEK RD

City

GOOD HOPE

State  
GAZip Code  
30641-2151FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSTRUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656305**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HORNBECK, JAMIE, , ,**

Mailing Address 1491 MARY LOUISE ROAD

City

DE WITT

State  
ARZip Code  
72042-2996FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HORNBECK GRAINOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657207**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

407.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1275 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOWARD, JERAL, , ,**

Mailing Address 49 KINGS RIVER RD.

City  
NORTH LITTLE ROCKState  
ARZip Code  
72116-6312FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655402**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOWELL, ANITA, , ,**

Mailing Address 208 VISTA CLIFF CIRCLE

City  
CASTLE ROCKState  
COZip Code  
80104-5527FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.62

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656257**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656579**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1276 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUDSON, ROBERT, Y., MR., JR.**

Mailing Address P.O. BOX 370

City  
SEBASTOPOLState  
MSZip Code  
39359-0370FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.19

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656413**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUDSPETH, WILLIAM, , ,**

Mailing Address 605 HILLVIEW PLACE

City  
LEESBURGState  
VAZip Code  
20175-5095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.20

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655951**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUTCHINSON, ROBERT, , MR.,**

Mailing Address 808 CRIMSON RIDGE TRL

City  
FUQUAY VARINAState  
NCZip Code  
27526-2718FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

444.10

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655583**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

239.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1277 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655135

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655153

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656389

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1278 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACOBS, MICHAEL, , ,**Mailing Address 3 WHITE OAK DR.  
APT CCity  
SMITHFIELDState  
NCZip Code  
27577-4872FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657193**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656604**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JENSON, JOHN, , ,**

Mailing Address 81 ANTIETAM DRIVE

City  
MORGANTOWNState  
WVZip Code  
26508-9005FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

302.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654720**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1279 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JENSON, JOHN, , ,**

Mailing Address 81 ANTIETAM DRIVE

City  
MORGANTOWNState  
WVZip Code  
26508-9005FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.10

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654756**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, BERNICE, , ,**Mailing Address 55 MELROY AVE  
APT 215City  
BUFFALOState  
NYZip Code  
14218-1660FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.22

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656798**

Amount of Each Receipt this Period

3.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSTON, JAMES, , ,**

Mailing Address 45 HUNTLEIGH DRIVE

City  
ALBANYState  
NYZip Code  
12211-1173FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654741**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

137.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1280 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, ROSS, , ,**

Mailing Address 433 LONDON BRIDGE ROAD UNIT 303

City  
LAKE HAVASU CITYState  
AZZip Code  
86403-4684FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HORIZON COMMUNITY BANKOccupation (for Individual)  
EXEC. V.P./CHIEF FINANCIAL OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654813**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, A. C., , , IV**

Mailing Address 500 N. SHORELINE BLVD. SUITE 700 N

City  
CORPUS CHRISTIState  
TXZip Code  
78401-0326FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JONES RANCH LLCOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.20

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656177**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, ALFRED, D., MR., JR.**

Mailing Address 616 LYNN AVE

City  
ANTIOCHState  
CAZip Code  
94509-5030FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

381.11

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656595**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1281 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, FRANK, , III**

Mailing Address 457 AVONDALE DR.

City  
BRANSONState  
MOZip Code  
65616-3485FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655823

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656207

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656210

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

99.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1282 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656216**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656221**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, JANET, , ,**

Mailing Address 2401 STANFORD ROAD

City  
PANAMA CITYState  
FLZip Code  
32405-3589FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AYA HEALTHCAREOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.44

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656348**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1283 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656462**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAMINSKI, BARBARA, , ,**

Mailing Address 214 WATERFORD DR.

City  
EDISONState  
NJZip Code  
08817-1914FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654802**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAUFF, WALLACE, , ,**

Mailing Address 1416 10TH COURT

City  
LAKE PARKState  
FLZip Code  
33403-2007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

884.85

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656932**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1284 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657129

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KELEDJIAN, EDWARD, , ,**

Mailing Address 29 KINGSBOROUGH CV

City  
INVERNESSState  
ILZip Code  
60010-5432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656522

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KELLY, ERNEST, G., MR., JR.**

Mailing Address 219 ANGELUS

City  
MEMPHISState  
TNZip Code  
38112-5201FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

965.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656061

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

162.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1285 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KELLY, ERNEST, G., MR., JR.**

Mailing Address 219 ANGELUS

City  
MEMPHISState  
TNZip Code  
38112-5201FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

965.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656074**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KELLY, ERNEST, G., MR., JR.**

Mailing Address 219 ANGELUS

City  
MEMPHISState  
TNZip Code  
38112-5201FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

965.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656082**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KELLY, ERNEST, G., MR., JR.**

Mailing Address 219 ANGELUS

City  
MEMPHISState  
TNZip Code  
38112-5201FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

965.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656089**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1286 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEMMERER, GORDON, PAUL, MR.,**

Mailing Address 422 SE BIRDIE CIR

City  
CEDAREdgeState  
COZip Code  
81413-3851FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

772.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656864**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEMP, REGINA, , ,**

Mailing Address 135 FOXHOLLIES BLVD

City  
BESSEMERState  
ALZip Code  
35022-5026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.50

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655988**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KESSELING, GLEN, , ,**

Mailing Address 11579 AGENCY HEDRICK RD

City  
OTTUMWAState  
IAZip Code  
52501-9036FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655300**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1287 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KESSLER, RICHARD, , ,**

Mailing Address 4901 VINELAND RD

City  
ORLANDOState  
FLZip Code  
32811-7300FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
HOTELS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654664

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KETCHUM, BRIAN, , ,**

Mailing Address 8371 CR 87

City  
HAMMOMDSPORTState  
NYZip Code  
14840-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656699

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLEMENTIK, DAVID, , ,**

Mailing Address 1206 GRAHAM AVE

City  
WINDBERState  
PAZip Code  
15963-1706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657196

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

235.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1288 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLOCK, MARY, , ,**

Mailing Address 5500 N 67TH PL

City  
PARADISE VALLEYState  
AZZip Code  
85253-5923FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.34

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656443**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655050**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KONYCSAK, LASZLO, , ,**

Mailing Address 205 CAMPSITE RD

City  
ROSCOEState  
NYZip Code  
12776-6577FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

570.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656521**

Amount of Each Receipt this Period

190.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

229.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1289 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOTZUR, RICHARD, , ,**

Mailing Address 29505 N. FM 681

City  
EDINBURGState  
TXZip Code  
78541-6130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2082.04

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655745**

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUHN, ROBERT, , ,**

Mailing Address 3718 LANGTRY DR

City  
AMARILLOState  
TXZip Code  
79109-3926FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.20

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655666**

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANCE, TERESA, , ,**

Mailing Address 2004 SIFIELD GREENS WAY

City  
SUN CITY CENTERState  
FLZip Code  
33573-7168FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.29

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654580**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1108.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1290 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANDES, SHARON, L., ,**

Mailing Address 8174 VISTA DR.

City  
LA MESAState  
CAZip Code  
91941-6430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.79

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657302**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANE, DAVINA, , ,**

Mailing Address 11323 PACIFIC ST.

City  
COLUMBIAState  
CAZip Code  
95310-9603FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.50

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655162**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.13

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655118**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1291 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.13

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655139**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.13

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655150**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.13

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655158**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1292 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.13

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655165**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.13

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655167**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.13

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655183**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.82



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1293 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LARSON, RICHARD, , ,**

Mailing Address 9 WARREN STREET

City  
LEXINGTONState  
MAZip Code  
02421-5624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RICHARD LARSONOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655945

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655802

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

696.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657186

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1294 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEAVENS, CAMERON, , ,**

Mailing Address 979 SYIDA DR.

City  
PACIFIC GROVEState  
CAZip Code  
93950-5327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAMERON LEAVENSOccupation (for Individual)  
LAND CARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657337**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEE, JEAN, T., ,**

Mailing Address 814 COLLEGE BLVD.

City  
SAN ANTONIOState  
TXZip Code  
78209-3628FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657389**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656222**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1295 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656237

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656250

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656256

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

74.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 1296 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656262**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656286**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LELEUX, DAVID, , ,**

Mailing Address 3 HEATHERSTONE DR.

City  
LAFAYETTEState  
LAZip Code  
70508-4913FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGINEEROccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

276.25

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655648**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

157.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1297 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKERState  
COZip Code  
80138-8221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654880

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKERState  
COZip Code  
80138-8221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654887

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKERState  
COZip Code  
80138-8221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654888

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

29.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1298 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKER

State  
CO

Zip Code  
80138-8221

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.41

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

**Transaction ID : SA11A.27654890**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKER

State  
CO

Zip Code  
80138-8221

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.41

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

**Transaction ID : SA11A.27654892**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKER

State  
CO

Zip Code  
80138-8221

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.41

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

**Transaction ID : SA11A.27654897**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

44.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1299 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEYSHON, DAVID, W., MR.,**

Mailing Address 1608 HONEYSUCKLE CT

City  
WEST CHESTERState  
PAZip Code  
19380-4361FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SHELF STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655002**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIGHT, IDA, , ,**

Mailing Address P.O.BOX 218

City  
BROAD RUNState  
VAZip Code  
20137-0218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655397**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

967.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657290**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1300 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LITZAU, JEROME, , ,**

Mailing Address 300 E N SHORE DR. APT 14

City  
HARTLANDState  
WIZip Code  
53029-FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.52

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655631**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIVINGSTON, DIANA, , ,**

Mailing Address P O BOX 580

City  
GIRDWOODState  
AKZip Code  
99587-0580FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656215**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LLOYD, KAREN, , MS.,**

Mailing Address 1324 KINGSLAND DR.

City  
FOLKSTONState  
GAZip Code  
31537-2870FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.23

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655726**

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.90



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1301 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOGAN, RODGER, , ,**

Mailing Address 10647 SKI CHASTE LN

City  
AXISState  
ALZip Code  
36505-4206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655432

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOUGHNEY, ROBERT, D., MR.,**

Mailing Address 2316 GOLDSMITH ST

City  
HOUSTONState  
TXZip Code  
77030-1130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOUGHNEY CONSULTING INC.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655257

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOUGHNEY, ROBERT, D., MR.,**

Mailing Address 2316 GOLDSMITH ST

City  
HOUSTONState  
TXZip Code  
77030-1130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOUGHNEY CONSULTING INC.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

601.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655259

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

69.96

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1302 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LOUGHNEY, ROBERT, D., MR.,

Mailing Address 2316 GOLDSMITH ST

City  
HOUSTONState  
TXZip Code  
77030-1130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOUGHNEY CONSULTING INC.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655263

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOUGHNEY, ROBERT, D., MR.,

Mailing Address 2316 GOLDSMITH ST

City  
HOUSTONState  
TXZip Code  
77030-1130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOUGHNEY CONSULTING INC.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655268

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUCK, JOHN, , ,

Mailing Address 38638 BOAT HOUSE DR.

City  
MURRIETAState  
CAZip Code  
92563-2583FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

319.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655027

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1303 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUCK, WALTER, , ,**

Mailing Address 203344 EVERGREEN SPRINGS LN

City  
SPRINGState  
TXZip Code  
77379-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655919**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655355**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655359**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

262.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1304 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655370**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657286**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUPO, LOUIS, , ,**

Mailing Address 447 BLUE POINT RD.

City  
FARMINGVILLEState  
NYZip Code  
11738-1811FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657211**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1305 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LYNCH, JEFFREY, , ,**

Mailing Address 5922 MAPLESHADE LN

City  
DALLASState  
TXZip Code  
75252-2353FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LYNCH LAW FIRMOccupation (for Individual)  
TRIAL LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.07

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655304**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LYSTIG, CAROLYN, , ,**

Mailing Address 2155 6TH LANE SE, APT 206

City  
CAMBRIDGEState  
MNZip Code  
55008-2528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.58

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656352**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACARIO, KELLI, , ,**

Mailing Address 27136 SOUTH INDIAN ROAD

City  
PARK HILLState  
OKZip Code  
74451-3022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

858.69

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655277**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1306 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACKEY, BERNARD, , ,**

Mailing Address PO BOX 241068

City  
OMAHAState  
NEZip Code  
68124-5068FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655829

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MADSEN, ANDREW, H., ,**

Mailing Address 2901 SPRINGFIELD ROAD

City  
BROOMALLState  
PAZip Code  
19008-1308FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MADSEN INCOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656272

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAIRS, JEREMY, , ,**

Mailing Address 3946 MCGIRTS BLVD

City  
JACKSONVILLEState  
FLZip Code  
32210-4380FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COX PETROLEUM TRANSPORTOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656143

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

171.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1307 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAIRS, JEREMY, , ,**

Mailing Address 3946 MCGIRTS BLVD

City  
JACKSONVILLEState  
FLZip Code  
32210-4380FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COX PETROLEUM TRANSPORTOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656158**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MALACOS, GEORGE, , MR.,**

Mailing Address 10653 FALLS CREEK LN

City  
DAYTONState  
OHZip Code  
45458-3598FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MIAMI INDUSTRIAL TRUCKS, INC.Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655363**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656180**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

258.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1308 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARGULIES, CORINNE, , ,**

Mailing Address 303 E 57TH STREET - APT 43B

City  
NEW YORKState  
NYZip Code  
10022-2693FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655434

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTINEZ, AMNERIS, , ,**

Mailing Address 4404 LAKEMONT CT

City  
WEST PALM BEACHState  
FLZip Code  
33403-1158FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PGA NATIONAL RESORTOccupation (for Individual)  
HOUSEKEEPING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655062

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, HELEN, , ,**

Mailing Address 1620 DOGWOOD TRL

City  
CORSICANAState  
TXZip Code  
75110-1036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KDOccupation (for Individual)  
ADMISSIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

302.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656360

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

338.48



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1309 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656933**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656966**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

832.39

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655040**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

14.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1310 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.39

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

**Transaction ID : SA11A.27655706**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATEER, RAYMOND, , ,**

Mailing Address 1278 MATEER RD

City  
KITTANNINGState  
PAZip Code  
16201-8024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

**Transaction ID : SA11A.27657122**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MC DONALD, MELODY, L., MRS.,**

Mailing Address 1098 VERNIER PLACE

City  
STANFORDState  
CAZip Code  
94305-1027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

532.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

**Transaction ID : SA11A.27654796**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1311 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCLEARY, GAY, , ,**

Mailing Address 2901 SHERMAN LANE

City  
CARSON CITYState  
NVZip Code  
89706-1744FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.15

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654679**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.36

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656359**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCRAY, GREGORY, C., MR.,**

Mailing Address 4604 YELLOW ROSE TRAIL

City  
AUSTINState  
TXZip Code  
78749-1670FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

407.20

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655012**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1312 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCHUGH, RICHARD, , ,**

Mailing Address 3016 NE 154 AVE.

City  
VANCOUVERState  
WAZip Code  
98682-8429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.96

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655140**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCKINNEY, JOHN, A., ,**

Mailing Address 2430 E BETHEL DR.

City  
ANAHEIMState  
CAZip Code  
92806-4705FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.56

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656019**

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCKINNEY, JOHN, A., ,**

Mailing Address 2430 E BETHEL DR.

City  
ANAHEIMState  
CAZip Code  
92806-4705FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

353.56

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656024**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1313 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCKINNEY, JOHN, A., ,**

Mailing Address 2430 E BETHEL DR.

City  
ANAHEIM

State  
CA

Zip Code  
92806-4705

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.56

Date of Receipt

**02** / **06** / **2025**

**Transaction ID : SA11A.27656027**

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCKINNEY, JOHN, A., ,**

Mailing Address 2430 E BETHEL DR.

City  
ANAHEIM

State  
CA

Zip Code  
92806-4705

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.56

Date of Receipt

**02** / **06** / **2025**

**Transaction ID : SA11A.27656036**

Amount of Each Receipt this Period

12.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCKINNEY, JOHN, A., ,**

Mailing Address 2430 E BETHEL DR.

City  
ANAHEIM

State  
CA

Zip Code  
92806-4705

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

353.56

Date of Receipt

**02** / **06** / **2025**

**Transaction ID : SA11A.27657136**

Amount of Each Receipt this Period

20.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

38.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1314 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCLAUGHLIN, HELEN, , ,**

Mailing Address 2300 CHANDLERS LANE UNIT 108

City  
OLMSTED FALLSState  
OHZip Code  
44138-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657161

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCLAUGHLIN, HELEN, , ,**

Mailing Address 2300 CHANDLERS LANE UNIT 108

City  
OLMSTED FALLSState  
OHZip Code  
44138-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657168

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCLAUGHLIN, HELEN, , ,**

Mailing Address 2300 CHANDLERS LANE UNIT 108

City  
OLMSTED FALLSState  
OHZip Code  
44138-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657182

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1315 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCLENDON, MARGARET, , ,**

Mailing Address 85 PHILLIPS ST.

City  
RICHLANDState  
GAZip Code  
31825-6255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9626.40

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655382**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCLENDON, MARGARET, , ,**

Mailing Address 85 PHILLIPS ST.

City  
RICHLANDState  
GAZip Code  
31825-6255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9626.40

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655398**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCLENDON, MARGARET, , ,**

Mailing Address 85 PHILLIPS ST.

City  
RICHLANDState  
GAZip Code  
31825-6255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

9626.40

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655410**

Amount of Each Receipt this Period

18.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1316 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCLENDON, MARGARET, , ,**

Mailing Address 85 PHILLIPS ST.

City  
RICHLANDState  
GAZip Code  
31825-6255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9626.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657338**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCPHERSON, DARLENE, , ,**

Mailing Address PO BOX 2348

City  
ANAHUACState  
TXZip Code  
77514-2348FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655619**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEADEN, THOMAS, , ,**

Mailing Address 24 ENGINE CREEK CT

City  
DURANGOState  
COZip Code  
81301-8593FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

397.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656110**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.92



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1317 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEREDITH, RANDY, , ,**

Mailing Address 266 BULLFINCH ROAD

City  
MOORESVILLEState  
NCZip Code  
28117-5407FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1978.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656630

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEYERS-GLYDA, DONNA, , MS.,**

Mailing Address 7512 VALHALLA DRIVE

City  
MAUMEEState  
OHZip Code  
43537-9512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SERENITY REALTYOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655865

Amount of Each Receipt this Period

1.07

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIDDLETON, JOHN, , ,**

Mailing Address 712 RIDGE RD

City  
HIGHLAND PARKState  
ILZip Code  
60035-3834FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

429.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654700

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1318 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, BONNIE, F., ,**

Mailing Address 14 WILMINGTON WAY

City  
CONROEState  
TXZip Code  
77384-4777FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656394**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, BONNIE, F., ,**

Mailing Address 14 WILMINGTON WAY

City  
CONROEState  
TXZip Code  
77384-4777FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656435**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, LINDA, , ,**

Mailing Address 145 RD 683

City  
GUNTOWNState  
MSZip Code  
38849-6530FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656696**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1319 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MINNEMAN, GAIL, , MS.,**

Mailing Address 650 COUNTRY CLUB DR

City  
BATTLE CREEKState  
MIZip Code  
49015-3651FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTOMOBILE DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.56

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656664**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MINNEMAN, GAIL, , MS.,**

Mailing Address 650 COUNTRY CLUB DR

City  
BATTLE CREEKState  
MIZip Code  
49015-3651FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTOMOBILE DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.56

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657061**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MINNEMAN, GAIL, , MS.,**

Mailing Address 650 COUNTRY CLUB DR

City  
BATTLE CREEKState  
MIZip Code  
49015-3651FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTOMOBILE DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.56

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657065**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.69

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1320 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MINNEMAN, GAIL, , MS.,**

Mailing Address 650 COUNTRY CLUB DR

City  
BATTLE CREEK

State  
MI

Zip Code  
49015-3651

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
AUTOMOBILE DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.56

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

**Transaction ID : SA11A.27657067**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MINNEMAN, GAIL, , MS.,**

Mailing Address 650 COUNTRY CLUB DR

City  
BATTLE CREEK

State  
MI

Zip Code  
49015-3651

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
AUTOMOBILE DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.56

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

**Transaction ID : SA11A.27657068**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MINNEMAN, GAIL, , MS.,**

Mailing Address 650 COUNTRY CLUB DR

City  
BATTLE CREEK

State  
MI

Zip Code  
49015-3651

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
AUTOMOBILE DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.56

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

**Transaction ID : SA11A.27657081**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

93.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1321 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIZAK, EVELYN, , ,**Mailing Address 10451 BELLS FERRY RD  
APT 3113City  
CANTONState  
GAZip Code  
30114-1297FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656081**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOLINA, JOSEPH, R., ,**

Mailing Address 7500 SW 6 ST

City  
MIAMIState  
FLZip Code  
33155-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655117**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTECILLO, NICASIO, , , JR.**

Mailing Address 15 STUYVESANT OVAL APT 6H

City  
NEW YORKState  
NYZip Code  
10009-2019FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MOUNT SINAI BETH ISRAEL MEDICAL CENTEROccupation (for Individual)  
CLINICAL LABORATORY TECHNOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656761**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

226.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1322 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOORE, SUSAN, , ,**

Mailing Address 70 BROOKS ROAD

City  
LONGMEADOWState  
MAZip Code  
01106-2129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655592**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOSER, ROBIN, , ,**

Mailing Address 348 BURR COURT

City  
FORT MILLState  
SCZip Code  
29715-0162FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657124**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

955.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655088**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1323 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27655102

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27655120

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

955.83

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27655152

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

12.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1324 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655154**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656076**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NABORS, JAMES, L., ,**

Mailing Address 5064 WETHERSFIELD BLVD

City  
OLIVE BRANCHState  
MSZip Code  
38654-7826FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.66

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656306**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1325 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NABORS, JAMES, L., ,**

Mailing Address 5064 WETHERSFIELD BLVD

City  
OLIVE BRANCHState  
MSZip Code  
38654-7826FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.66

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656311**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NABORS, JAMES, L., ,**

Mailing Address 5064 WETHERSFIELD BLVD

City  
OLIVE BRANCHState  
MSZip Code  
38654-7826FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.66

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656314**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEAL, LONNIE, DAVID, ,**

Mailing Address 7128 NORTH 63DRIVE

City  
GLENDALEState  
AZZip Code  
85301-2385FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.21

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655440**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1326 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSEN, PATRICIA, , ,**

Mailing Address 10026 LLEWELLYN COURT

City  
FAIRFAXState  
VAZip Code  
22032-2713FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DODOccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654854**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, KAREN, , ,**

Mailing Address 4304 COCHRAN CHAPEL CIRCLE

City  
DALLASState  
TXZip Code  
75209-2026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656017**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, MIKE, G., ,**

Mailing Address 711 E 3230 N

City  
LEHIState  
UTZip Code  
84043-2910FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

479.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655112**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

99.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1327 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, PATRICIA, , ,**

Mailing Address 138 SOUTH SALEM DR.

City  
MCDONOUGHState  
GAZip Code  
30253-4768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655305**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEMEROFF, EILEEN, , ,**

Mailing Address 20 POND CROSSING

City  
SOUTHAMPTONState  
NYZip Code  
11968-4728FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1332.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654644**

Amount of Each Receipt this Period

37.48

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEUMAN, KIT, , ,**

Mailing Address 335 VINNEDGE AV.

City  
BLACKWELLState  
OKZip Code  
74631-4825FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655350**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1328 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEWCOMB, JULIE, , ,**

Mailing Address 11986 NORTH 83RD PLACE

City  
SCOTTSDALEState  
AZZip Code  
85260-5682FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SALES AND MARKETING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655866**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NGUYEN, MAITHI, , ,**

Mailing Address 1504 W 7TH ST

City  
SANTA ANAState  
CAZip Code  
92703-2913FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655862**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NGUYEN, TOAN, , ,**

Mailing Address 472 ILCREST DR.

City  
HOUSTONState  
TXZip Code  
77042-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656995**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1329 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NICHOLS, PHIL, , ,**

Mailing Address 407 WEST CORNELL STREET

City  
AVON PARKState  
FLZip Code  
33825-3700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1266.16

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657093**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NORSWORTHY, GEORGE, , ,**

Mailing Address 6600 N LOWER CASCADE DR.

City  
JACKSONState  
WYZip Code  
83001-9026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GEORGE NORSWORTHYOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

617.50

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655462**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

589.96

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657042**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1330 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O'FLYNN, ARMINDA, , ,**

Mailing Address 12864 BISCAYNE BLVD

City  
N. MIAMIState  
FLZip Code  
33181-2007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

992.53

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657080**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSBURN, ROBERT, , ,**

Mailing Address 12735 SHADOW CREEK PARKWAY

City  
PEARLANDState  
TXZip Code  
77584-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.25

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656560**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OTTO, JEFF, S., MR.,**

Mailing Address 25580 DODD BLVD

City  
LAKEVILLEState  
MNZip Code  
55044-8563FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

237.86

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654575**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1331 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OVALLE, HILDA, , ,**

Mailing Address 2018 HERITAGE RIDGE

City  
NORTH LAS VEGASState  
NVZip Code  
89031-0675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656344**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PACE, EDWARD, , ,**

Mailing Address 9412 CRESCENT BAR RD

City  
QUINCYState  
WAZip Code  
98848-9121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656810**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PALAZA, MADELEINE, , ,**

Mailing Address 69 KING ST.

City  
STOUGHTONState  
MAZip Code  
02072-3820FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

599.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656124**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1332 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALAZA, MADELEINE, , ,**

Mailing Address 69 KING ST.

City  
STOUGHTONState  
MAZip Code  
02072-3820FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.30

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656609**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PALAZA, MADELEINE, , ,**

Mailing Address 69 KING ST.

City  
STOUGHTONState  
MAZip Code  
02072-3820FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.30

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657301**

Amount of Each Receipt this Period

24.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PALERMO, MARK, , ,**

Mailing Address 246 GARFIELD PL

City  
BROOKLYNState  
NYZip Code  
11215-2207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER, INVESTOR, CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

748.48

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655044**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

138.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1333 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARKS, GAIL, A., MS.,**

Mailing Address 1704 KESTWICK DR.

City  
HOOVERState  
ALZip Code  
35226-2352FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.83

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655358**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARKS, JENNIE, , ,**

Mailing Address 386 W TROXELL RD

City  
OAK HARBORState  
WAZip Code  
98277-7909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.93

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656282**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKS, JENNIE, , ,**

Mailing Address 386 W TROXELL RD

City  
OAK HARBORState  
WAZip Code  
98277-7909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

521.93

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656299**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1334 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARRIERA, JEREMY, , ,**

Mailing Address 483 E WISER LAKE RD

City  
LYNDENState  
WAZip Code  
98264-9454FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AXIOM DIVISION 7Occupation (for Individual)  
ROOFING CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656754**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARSONS, DENISE, , ,**

Mailing Address 1324 COUNTY ROAD 225

City  
BLUFFTONState  
TXZip Code  
78607-3008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655299**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORGState  
VAZip Code  
23860-8229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

388.35

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655960**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1335 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETRONE, DICK, P., ,**

Mailing Address 19958 SW 90TH PLACE

City  
TUALATINState  
ORZip Code  
97062-9494FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656423

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETRONE, DICK, P., ,**

Mailing Address 19958 SW 90TH PLACE

City  
TUALATINState  
ORZip Code  
97062-9494FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656455

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657060

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1336 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657062**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657064**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIERCE, ARLENE, , ,**

Mailing Address 4931 ELMGATE DR.

City  
ORCHARD LAKEState  
MIZip Code  
48324-3012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

566.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657071**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1337 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PINKERTON, EILEEN, R., MS.,**

Mailing Address 3340 GREGORY DR W

City  
BILLINGSState  
MTZip Code  
59102-0597FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DECORATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.96

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657039**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PINKERTON, EILEEN, R., MS.,**

Mailing Address 3340 GREGORY DR W

City  
BILLINGSState  
MTZip Code  
59102-0597FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DECORATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.96

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657386**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POELZING, DIETMAR, G., ,**

Mailing Address 1947 FORTSTONE LN

City  
COLUMBUSState  
OHZip Code  
43228-3876FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.23

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656567**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1338 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POELZING, DIETMAR, G., ,**

Mailing Address 1947 FORTSTONE LN

City  
COLUMBUSState  
OHZip Code  
43228-3876FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.23

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656571**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POELZING, DIETMAR, G., ,**

Mailing Address 1947 FORTSTONE LN

City  
COLUMBUSState  
OHZip Code  
43228-3876FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.23

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656572**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POELZING, DIETMAR, G., ,**

Mailing Address 1947 FORTSTONE LN

City  
COLUMBUSState  
OHZip Code  
43228-3876FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.23

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656581**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1339 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654605**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POMEROY, PATTI, , ,**

Mailing Address 902 SILVER ST

City  
PRINCETONState  
TXZip Code  
75407-2281FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.27

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656294**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.88

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654984**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1340 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRESLEY, JUANITA, , MS.,**

Mailing Address 4115 E. CLOCKTOWER LANE, APT. 246

City  
MERIDIANState  
IDZip Code  
83642-4742FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656427**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRESSER, IRIS, V., MS.,**

Mailing Address 1845 COLWOOD CT

City  
JACKSONVILLEState  
FLZip Code  
32217-2686FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654593**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRYOR, TREVA, , MRS.,**

Mailing Address 13 HARDING DR.

City  
SEARCYState  
ARZip Code  
72143-5704FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656538**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

154.34



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1341 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAINEY, DAVID, L., MR.,**

Mailing Address 1791 RAMPART DR.

City  
ALEXANDRIAState  
VAZip Code  
22308-1655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.78

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27654634

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAVENSCROFT, ROBERT, , ,**

Mailing Address 8445 E HARTFORD DR.

City  
SCOTTSDALEState  
AZZip Code  
85255-5450FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.16

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27656860

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REAGAN, RONALD, C., ,**

Mailing Address 1783 FOUR MILE COVE PKWY

City  
CAPE CORALState  
FLZip Code  
33990-2409FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.95

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27654693

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

166.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1342 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REESON, EVELYN, , ,**

Mailing Address 439 GRAND DRIVE

City  
BIGFORKState  
MTZip Code  
59911-3614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655698**

Amount of Each Receipt this Period

42.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REICHOW, GARY, , ,**

Mailing Address 5516 RIGEL COURT

City  
ATLANTIC BEACHState  
FLZip Code  
32233-4581FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654978**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REINHARD, ROSEMARIE, , MR.,**

Mailing Address 2755 FALCON STREET

City  
EAST MEADOWState  
NYZip Code  
11554-4318FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

505.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656489**

Amount of Each Receipt this Period

7.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

153.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1343 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REYES, CATALINO, A., MR.,**

Mailing Address 1808 N KENMORE AVE

City  
LOS ANGELESState  
CAZip Code  
90027-4008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655639**

Amount of Each Receipt this Period

17.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RICHARDSON, CHRIS, , ,**

Mailing Address 4001 W SAM HOSUTON PKWY N STE 100

City  
HOUSTONState  
TXZip Code  
77043-1236FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BLAZER BUILDINGOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.50

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656987**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656095**

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1344 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656098**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RITTER, ANN, W., MS.,**

Mailing Address 2551 PALOMINO DR.

City  
CAPE GIRARDEAUState  
MOZip Code  
63701-1958FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1805.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657066**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBBINS, RAY, L., MRS.,**

Mailing Address 114 SHADY VALLEY DR.

City  
CHESTERFIELDState  
MOZip Code  
63017-2626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

342.13

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654600**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1345 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, THOMAS, , ,**

Mailing Address 1906 MARIGOLD ST

City  
ALEXANDRIAState  
LAZip Code  
71301-3934FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655200**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROESTENBERG, CINDY, , ,**

Mailing Address 284 FT. WILDERNESS RD

City  
WHITTIERState  
NCZip Code  
28789-8364FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654804**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROESTENBERG, CINDY, , ,**

Mailing Address 284 FT. WILDERNESS RD

City  
WHITTIERState  
NCZip Code  
28789-8364FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654807**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

114.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1346 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROESTENBERG, CINDY, , ,**

Mailing Address 284 FT. WILDERNESS RD

City  
WHITTIERState  
NCZip Code  
28789-8364FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2025

**Transaction ID : SA11A.27654808**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2025

**Transaction ID : SA11A.27655880**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROONEY, RANDALL, , ,**

Mailing Address 101 ONEILL CT

City  
FOLSOMState  
CAZip Code  
95630-2379FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2025

**Transaction ID : SA11A.27656349**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

201.04

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1347 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROSE, BOWEN, , ,

Mailing Address 105 E MAIN ST.

City  
EDNAState  
TXZip Code  
77957-2826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655330

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROSE, BOWEN, , ,

Mailing Address 105 E MAIN ST.

City  
EDNAState  
TXZip Code  
77957-2826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656006

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROWE, GARRY, , ,

Mailing Address 6650 EVENING ST

City  
COLUMBUSState  
OHZip Code  
43085-2487FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

759.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657127

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

111.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1348 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654662**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655006**

Amount of Each Receipt this Period

2.06

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655306**

Amount of Each Receipt this Period

1.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4.35



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1349 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27655975

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27656799

Amount of Each Receipt this Period

2.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27656836

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1350 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656861

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656869

Amount of Each Receipt this Period

11.45

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655213

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

14.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1351 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SADAR, AMELIA, , MS.,**

Mailing Address 1604STONE MANSION DR.

City  
SEWICKLEYState  
PAZip Code  
15143-8601FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.91

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655980**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SALMOND, KENT, , ,**

Mailing Address 808 LILAC WAY

City  
LOS GATOSState  
CAZip Code  
95032-3527FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656812**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANCHEZ, GABRIEL, , ,**

Mailing Address 14912 TEMPLAR DR

City  
LA MIRADAState  
CAZip Code  
90638-3820FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

283.11

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655654**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1352 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANCHEZ, GABRIEL, , ,**

Mailing Address 14912 TEMPLAR DR

City  
LA MIRADAState  
CAZip Code  
90638-3820FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.11

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655660**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANCHEZ, GABRIEL, , ,**

Mailing Address 14912 TEMPLAR DR

City  
LA MIRADAState  
CAZip Code  
90638-3820FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.11

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655665**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANCHEZ, GABRIEL, , ,**

Mailing Address 14912 TEMPLAR DR

City  
LA MIRADAState  
CAZip Code  
90638-3820FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

283.11

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655667**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1353 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANFIAGO, RENE, , ,**

Mailing Address 11223 EWING CIRCLE SOUTH

City  
MINNEAPOLISState  
MNZip Code  
55431-3854FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656169**

Amount of Each Receipt this Period

21.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANTORO, NANCY, , ,**

Mailing Address P.O. BOX 2095

City  
RANCHO SANTA FEState  
CAZip Code  
92067-2095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1476.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656320**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHARNINGHAUSEN, JERROLD, , ,**

Mailing Address 108 ANN PLACE

City  
DOTHANState  
ALZip Code  
36303-1929FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
US ARMYOccupation (for Individual)  
INDUSTRIAL HYGIENIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654672**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1354 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHILDWACHTER, FRED, , ,**

Mailing Address 34 MAPLEWOOD DR

City  
DANBURYState  
CTZip Code  
06811-4211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656094

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654982

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655460

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

53.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1355 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLOUGH, JAMES, , ,**

Mailing Address 3810 CHURCH HILL

City  
CRYSTAL LAKEState  
ILZip Code  
60014-6511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.20

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654725**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHMECK, RICHARD, , MRS.,**

Mailing Address 1544 SAUCONY RD

City  
KUTZTOWNState  
PAZip Code  
19530-8875FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.66

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656965**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHNEEGASS, GEORGE, F., MR.,**

Mailing Address 3675 MOUNTAIN DR.

City  
COLORADO SPRINGSState  
COZip Code  
80918-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

634.42

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654860**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1356 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHRAM, CHARLES, , ,**

Mailing Address 14816 WEST HURON DRIVE

City  
SUN CITY WESTState  
AZZip Code  
85375-5988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.52

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657388**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHRANTHAYWARD, LAURA, , ,**

Mailing Address 545 MATAGUAL

City  
VISTAState  
CAZip Code  
92081-6608FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ADPOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.20

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654956**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHRIBER, C P, , ,**

Mailing Address P.O. BOX 70

City  
MCNEILState  
TXZip Code  
78651-0070FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FILM FLEET, LLCOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.05

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654789**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

220.82



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1357 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHROEDER, STEPHEN, , ,**

Mailing Address 20722 348TH STREET

City  
TAYLORS FALLSState  
MNZip Code  
55084-2848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656637**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHRUM, VALERIE, , ,**

Mailing Address 8654 WEDGEWOOD LN N

City  
MAPLE GROVEState  
MNZip Code  
55369-4615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656351**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SETZER, JEFF, , ,**

Mailing Address 650 STAMPEDE TRAIL

City  
GALLATIN GATEWAYState  
MTZip Code  
59730-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SETZER FOREST PRODUCTS INC.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1041.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654592**

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

603.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1358 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEWELL, GARY, W., MR.,**

Mailing Address 3400 JUNCTION CITY HWY

City  
EL DORADOState  
ARZip Code  
71730-8308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SEWELL OIL COMPANYOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656741**

Amount of Each Receipt this Period

475.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHEDLOCK, JOHN, , ,**

Mailing Address 10089 IRON MOUNTAIN CT

City  
RANCHO CUCAMONGAState  
CAZip Code  
91737-6831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654907**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHEDLOCK, JOHN, , ,**

Mailing Address 10089 IRON MOUNTAIN CT

City  
RANCHO CUCAMONGAState  
CAZip Code  
91737-6831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655202**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

477.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1359 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHEDLOCK, JOHN, , ,**

Mailing Address 10089 IRON MOUNTAIN CT

City  
RANCHO CUCAMONGAState  
CAZip Code  
91737-6831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655311

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHMOLDAS, CHESTER, J., MR.,**

Mailing Address 1700 N REID HOOKER

City  
EADSState  
TNZip Code  
38028-7960FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TOBACCO SUPERSTORES, INC.Occupation (for Individual)  
BUSINESS MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657180

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655879

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

111.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1360 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655881**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655885**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHRINER, ROBERT, , ,**

Mailing Address 519 MIAMI CLUB CT

City  
MISHAWAKAState  
INZip Code  
46544-2675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1435.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656957**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1361 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHUGER, JILL, , ,**

Mailing Address N7756 BUSHEY RD

City  
TREGOState  
WIZip Code  
54888-9327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656392

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIEWERT, CHARLES, R., ,**

Mailing Address 6067 HOGAN DR N

City  
KEIZERState  
ORZip Code  
97303-7445FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656683

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656487

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1362 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656488

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656490

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656493

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1363 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656495

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656498

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656499

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1364 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656501

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656506

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657343

Amount of Each Receipt this Period

0.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

73.18



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1365 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.14

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657344**

Amount of Each Receipt this Period

0.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.14

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657345**

Amount of Each Receipt this Period

0.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, DANIEL, G., MR.,**Mailing Address 7 WOODBINE RD  
APT 100City  
FLORHAM PARKState  
NJZip Code  
07932-2649FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

533.01

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654981**

Amount of Each Receipt this Period

15.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

16.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1366 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, DANIEL, G., MR.,**Mailing Address 7 WOODBINE RD  
APT 100City  
FLORHAM PARKState  
NJZip Code  
07932-2649FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.01

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656419**

Amount of Each Receipt this Period

18.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, ELIZABETH, , ,**

Mailing Address 1709 INDIAN WELLS AVE

City  
OCALAState  
FLZip Code  
34472-8401FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.57

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657143**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, KELLY, , ,**

Mailing Address 5800 GRASSMERE LANE

City  
DALLASState  
TXZip Code  
75205-4624FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.98

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655831**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1367 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655532

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656128

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656483

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

61.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1368 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655349**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOOKRADGE, HELEN, , ,**

Mailing Address 231 LAKEVIEW DR

City  
MICHIGAN CITYState  
INZip Code  
46360-0802FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BEACON HEALTH SYSTEMOccupation (for Individual)  
R.N.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656654**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOUTHERLAND, WYNONA, , ,**

Mailing Address 3095 FORREST DR

City  
FAIRBANKSState  
AKZip Code  
99709-5742FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656254**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1369 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPAETH, EDMUND, , ,**

Mailing Address 26536 LOVE LN

City  
RAMONAState  
CAZip Code  
92065-4822FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655760

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPAETH, EDMUND, , ,**

Mailing Address 26536 LOVE LN

City  
RAMONAState  
CAZip Code  
92065-4822FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655782

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPALLONE, ARLENE, , ,**

Mailing Address 5925 BRAE BURN CIR

City  
VERO BEACHState  
FLZip Code  
32967-5277FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655516

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1370 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27655748

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27655753

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

764.59

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025

Transaction ID : SA11A.27655756

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1371 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655759

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655762

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655766

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1372 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEINMETZ, LEE, , ,**

Mailing Address POB 694

City  
TOPPENISHState  
WAZip Code  
98948-0694FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656655

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654994

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654998

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.03



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1373 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655001

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655008

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655014

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1374 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STIMSON, JOHN, , ,

Mailing Address 11680 WEST ALFRED COURT

City  
BOISEState  
IDZip Code  
83713-1893FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655747

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STORMENT, JOHN, B., MR.,

Mailing Address 6202 E MCKELLIPS RD  
UNIT 224City  
MESAState  
AZZip Code  
85215-2876FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654581

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STORMENT, JOHN, B., MR.,

Mailing Address 6202 E MCKELLIPS RD  
UNIT 224City  
MESAState  
AZZip Code  
85215-2876FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

678.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654587

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1375 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STOUT, GREGORY, , ,**

Mailing Address 1747 TOMMY AARON DR

City  
EL PASOState  
TXZip Code  
79936-4621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655147

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOUT, MERLE, , ,**

Mailing Address 13141 W WATERSIDE DR.

City  
BATON ROUGEState  
LAZip Code  
70818-5853FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655518

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOUT, MERLE, , ,**

Mailing Address 13141 W WATERSIDE DR.

City  
BATON ROUGEState  
LAZip Code  
70818-5853FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655555

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1376 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STOUT, MERLE, , ,**

Mailing Address 13141 W WATERSIDE DR.

City  
BATON ROUGEState  
LAZip Code  
70818-5853FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.19

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655562**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOUT, MERLE, , ,**

Mailing Address 13141 W WATERSIDE DR.

City  
BATON ROUGEState  
LAZip Code  
70818-5853FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.19

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655574**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STUDINKA, JOYCE, , ,**

Mailing Address 145 WOODMONT DR

City  
BIRMINGHAMState  
ALZip Code  
35209-6627FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

347.38

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654777**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

41.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1377 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STURGILL, LARRY, , ,**

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655236**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655800**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656278**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1378 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUTAY, CAROL, , ,**

Mailing Address 9327 CYPRESS BEND DR.

City  
TAMPAState  
FLZip Code  
33647-2553FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.88

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656807**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SYLVESTRI, RONALD, J., MR.,**

Mailing Address 333 WEST STREET # 5

City  
DARIENState  
CTZip Code  
06820-4038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.65

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656916**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TARR, ANNE, , ,**

Mailing Address 13306 SOUTHWALK

City  
SAN ANTONIOState  
TXZip Code  
78232-4843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

987.25

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655372**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1379 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, BOBBY, L., MR.,**

Mailing Address 1921 MONTERREY ST

City  
ALLENState  
TXZip Code  
75013-6133FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RYDEROccupation (for Individual)  
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655645

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, DALLAS, , ,**

Mailing Address 2616 CRAZYHORSE PASS

City  
AUSTINState  
TXZip Code  
78734-2814FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654973

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, PEGGY, , ,**

Mailing Address 13320 NEW DELAWARE ROAD

City  
MOUNT VERNONState  
OHZip Code  
43050-9138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654993

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

202.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1380 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMAS, LAUREL, , ,**

Mailing Address 1450FM3006

City  
PLEASANTONState  
TXZip Code  
78064-6748FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.04

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656822**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMAS, LORITA, , ,**

Mailing Address 2000 WEST INTERNATIONAL AIRPORT RO

City  
ANCHORAGEState  
AKZip Code  
99502-1117FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ATP MEDICINE, LTDOccupation (for Individual)  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.69

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655094**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, BILLY, , ,**

Mailing Address P O BOX 1346

City  
MONTGOMERYState  
TXZip Code  
77356-1346FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

430.06

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655107**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

178.29



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1381 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, BILLY, , ,**

Mailing Address P O BOX 1346

City  
MONTGOMERY

State  
TX

Zip Code  
77356-1346

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

**Transaction ID : SA11A.27655371**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, BILLY, , ,**

Mailing Address P O BOX 1346

City  
MONTGOMERY

State  
TX

Zip Code  
77356-1346

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

**Transaction ID : SA11A.27656405**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANE

State  
UT

Zip Code  
84737-1405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

815.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

**Transaction ID : SA11A.27656002**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

47.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1382 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANE

State  
UT

Zip Code  
84737-1405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

**Transaction ID : SA11A.27656003**

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANE

State  
UT

Zip Code  
84737-1405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

**Transaction ID : SA11A.27656010**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, LUCILLE, , MS.,**

Mailing Address 660 WHITMORE RD APT 102

City  
DETROIT

State  
MI

Zip Code  
48203-1841

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

298.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

**Transaction ID : SA11A.27657259**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

103.22

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1383 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THOMPSON, LYUBOV, , ,

Mailing Address 14914 VINTAGE PRESERVE PKWY UNIT 5

City  
HOUSTONState  
TXZip Code  
77070-1578FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

872.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657048

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMPSON, LYUBOV, , ,

Mailing Address 14914 VINTAGE PRESERVE PKWY UNIT 5

City  
HOUSTONState  
TXZip Code  
77070-1578FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

872.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657049

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMPSON, LYUBOV, , ,

Mailing Address 14914 VINTAGE PRESERVE PKWY UNIT 5

City  
HOUSTONState  
TXZip Code  
77070-1578FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

872.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657050

Amount of Each Receipt this Period

0.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1384 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, WILLIAM, , MR.,**

Mailing Address 204 MANDALAY

City  
SAN MARCOSState  
TXZip Code  
78666-3631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655837**

Amount of Each Receipt this Period

20.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TOBEN, DENNIS, , ,**

Mailing Address 19501 40TH AVENUE WEST #545

City  
LYNNWOODState  
WAZip Code  
98036-5799FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654863**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TOM, ANGELICA, , ,**Mailing Address 2916 DATE ST  
9CCity  
HONOLULUState  
HIZip Code  
96816-1186FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WAILANA COFFEE HOUSEOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655160**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1385 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TOPPASS, WALLACE, , ,**

Mailing Address 303 KINGSCOURT DR.

City  
HOUSTONState  
TXZip Code  
77015-2320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENTERPRISE PRODUCTSOccupation (for Individual)  
PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654615

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654871

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27654875

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1386 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655170

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655172

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655174

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1387 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655175

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655176

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655180

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1388 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655184**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655230**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TUMLINSON, RICHARD, , ,**

Mailing Address P.O. BOX 3817

City  
ENGLEWOODState  
COZip Code  
80155-3817FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656902**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.18



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1389 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VALDIVIA, MARIA, , ,

Mailing Address 30 EAST 64TH HIALEAH

City  
HIALEAHState  
FLZip Code  
33013-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656738

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VALDIVIA, MARIA, , ,

Mailing Address 30 EAST 64TH HIALEAH

City  
HIALEAHState  
FLZip Code  
33013-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656760

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VAN LANDEGEND, JUDITH, , ,

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656513

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

157.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1390 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAWTER, STEVE, , ,**

Mailing Address 1701 CATALINA AVE

City  
SEAL BEACHState  
CAZip Code  
90740-5710FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657382**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655148**

Amount of Each Receipt this Period

4.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657243**

Amount of Each Receipt this Period

7.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1391 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657261**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VOLK, BEVERLY, , ,**

Mailing Address 1511 RED MAPLE LANE

City  
ALLENTOWNState  
PAZip Code  
18104-2011FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.43

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654674**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VON SCHIMMELMANN, KAREN, , ,**

Mailing Address 12521 GRITSTONE DRIVE

City  
DENTONState  
TXZip Code  
76207-5747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.76

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656339**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1392 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALDORF, RAYMOND, , ,**

Mailing Address 1428 INDIANA AVENUE

City  
SOUTH PASADENAState  
CAZip Code  
91030-4110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656383**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALDRUP, JAMES, , , III**

Mailing Address 2423 WINTHROP RD

City  
TALLAHASSEEState  
FLZip Code  
32308-0524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STREAM ENERGY, INC.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1215.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656382**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALLING, FRANCES, J., ,**

Mailing Address 14604 E 37TH ST S

City  
INDEPENDENCEState  
MOZip Code  
64055-3436FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655480**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1393 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WARD, THOMAS, , ,**

Mailing Address 11224 DELMAR STREET

City  
LEAWOODState  
KSZip Code  
66211-1332FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655981**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRISTOL MYERS SQUIBBOccupation (for Individual)  
COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656188**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEATHERMAN, GLENNA, F., ,**

Mailing Address 853 S NEWHAVEN DR.

City  
ORANGEState  
CAZip Code  
92869-5443FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655789**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1394 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEHMAN, JOAN, , ,**

Mailing Address 831 HICKORY KNOB CIRCLE

City  
CEDAR HILLState  
TXZip Code  
75104-7803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1670.81

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656332**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WELLS, JOE, , ,**

Mailing Address 207 JULIUS AVENUE

City  
PIKEVILLEState  
KYZip Code  
41501-1739FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MASON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.76

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656205**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELLS, SHARON, , ,**

Mailing Address 14004 E 24TH AVE

City  
SPOKANE VALLEYState  
WAZip Code  
99037-8341FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NAFICY CENTEROccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656467**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

142.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1395 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WESTFALL, ANNE, , ,**

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIAState  
WAZip Code  
98531-8894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655780**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHEELER, STEVEN, R., MR.,**

Mailing Address 21631 E 101ST ST S

City  
BROKEN ARROWState  
OKZip Code  
74014-3645FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27657183**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITE, JULIE, , ,**

Mailing Address 512 PAIGE DRIVE

City  
HOOVERState  
ALZip Code  
35226-1605FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655367**

Amount of Each Receipt this Period

120.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1396 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITE, STEPHEN, , ,**

Mailing Address 9345 OSAGE CIRCLE

City  
GARDEN RIDGEState  
TXZip Code  
78266-2060FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655199**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILDER, CAMILLE, , MRS.,**

Mailing Address 516 SUMMERFIELD DRIVE

City  
SMYRNAState  
TNZip Code  
37167-4231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655376**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILDER, CAMILLE, , MRS.,**

Mailing Address 516 SUMMERFIELD DRIVE

City  
SMYRNAState  
TNZip Code  
37167-4231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655598**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1397 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, CATHERINE, L., ,**

Mailing Address PO BOX 127

City  
SCHERTZState  
TXZip Code  
78154-0127FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.42

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657417**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, CATHERINE, L., ,**

Mailing Address PO BOX 127

City  
SCHERTZState  
TXZip Code  
78154-0127FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.42

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657422**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMS, WILLIAM, G., MR.,**

Mailing Address 3420 BLACKBURN ST.

City  
DALLASState  
TXZip Code  
75219-4434FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.32

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656945**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1398 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, WILLIAM, G., MR.,**

Mailing Address 3420 BLACKBURN ST.

City  
DALLASState  
TXZip Code  
75219-4434FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.32

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657054**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, AUDREY, , ,**

Mailing Address 5216 N MALLORCA WAY

City  
MERIDIANState  
IDZip Code  
83646-7473FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27655524**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, JEAN, , ,**

Mailing Address 5644 ARAL DRIVE

City  
LAKELANDState  
FLZip Code  
33805-9615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.62

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654950**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1399 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, STEVE, , ,**

Mailing Address 1305 233RD ST SE

City  
BOTHELLState  
WAZip Code  
98021-5804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655092**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINKLEBLACK, SUE, , ,**

Mailing Address 509 SAINT FRANCIS RD

City  
EUFAULAState  
ALZip Code  
36027-9524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655935**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODS, BILLY, R., MR., JR.**

Mailing Address 3363 HWY 4

City  
RINGGOLDState  
LAZip Code  
71068-2942FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

574.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655244**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1400 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODS, GORDON, , ,**

Mailing Address 401 DAMON POINT ROAD

City  
BRIDGEPORTState  
NYZip Code  
13030-9621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.35

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654772**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOOTTEN, RIKE, , ,**Mailing Address 2100 S JOSEPHINE ST  
UNIT 4106City  
DENVERState  
COZip Code  
80210-4852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657027**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOOTTEN, RIKE, , ,**Mailing Address 2100 S JOSEPHINE ST  
UNIT 4106City  
DENVERState  
COZip Code  
80210-4852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27657029**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1401 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WOOTTEN, RIKE, , ,

Mailing Address 2100 S JOSEPHINE ST  
UNIT 4106City  
DENVERState  
COZip Code  
80210-4852FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657034

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WRIGHT, KARRIE, , MS.,

Mailing Address 14 EAST 75TH STREET  
APARTMENT 7ECity  
NEW YORKState  
NYZip Code  
10021-2625FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656055

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WRIGHT, SCOTT, , ,

Mailing Address 6679 BRAEMAR AVE. S

City  
NOBLESVILLEState  
INZip Code  
46062-8441FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LIBERTYOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655483

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

189.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1402 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YALE, ALAN, R., MR.,

Mailing Address 1418 N LAKE SHORE DR. APT. 20

City  
CHICAGOState  
ILZip Code  
60610-1687FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27657037

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27655427

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656742

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

248.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1403 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YATES, SYLVIA, , ,**

Mailing Address 4107 N ALABAMA ST

City  
LOXLEYState  
ALZip Code  
36551-4533FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.60

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656824**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YATES, SYLVIA, , ,**

Mailing Address 4107 N ALABAMA ST

City  
LOXLEYState  
ALZip Code  
36551-4533FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.60

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656837**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YATES, SYLVIA, , ,**

Mailing Address 4107 N ALABAMA ST

City  
LOXLEYState  
ALZip Code  
36551-4533FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.60

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656848**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1404 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YATES, SYLVIA, , ,**

Mailing Address 4107 N ALABAMA ST

City  
LOXLEYState  
ALZip Code  
36551-4533FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.60

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656883**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNG, PATRICIA, , ,**

Mailing Address 9940 PREMIERE VIEW CIR

City  
HAGERSTOWNState  
MDZip Code  
21740-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.42

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27654660**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZAJIC, DWAYNE, , ,**

Mailing Address 2459 FRUITRIDGE ROAD

City  
SACRAMENTOState  
CAZip Code  
95822-2243FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2025**Transaction ID : SA11A.27656591**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.51



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1405 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZAJIC, DWAYNE, , ,**

Mailing Address 2459 FRUITRIDGE ROAD

City  
SACRAMENTOState  
CAZip Code  
95822-2243FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656829**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZAMORA, DUCELLA, , ,**

Mailing Address 1287 W CALLE PLAYA DE SIESTA

City  
SAHUARITAState  
AZZip Code  
85629-8048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27654658**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZENKO, JOHN, , ,**

Mailing Address 232 TANGIER AVE

City  
PALM BEACHState  
FLZip Code  
33480-3516FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27656172**

Amount of Each Receipt this Period

750.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

880.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1406 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZGORSKI, DAWN, , ,**

Mailing Address 1723 BRODBECK ROAD

City  
HAMPSTEADState  
MDZip Code  
21074-1541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656445

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZGORSKI, DAWN, , ,**

Mailing Address 1723 BRODBECK ROAD

City  
HAMPSTEADState  
MDZip Code  
21074-1541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656459

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZGORSKI, DAWN, , ,**

Mailing Address 1723 BRODBECK ROAD

City  
HAMPSTEADState  
MDZip Code  
21074-1541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA11A.27656469

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

117.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1407 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZIOMEK, HEIDI, , ,**

Mailing Address 227 TRAFALGAR LANE

City  
SAN CLEMENTEState  
CAZip Code  
92672-5482FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA11A.27655250**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11C.27658327**

Amount of Each Receipt this Period

92883.11

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661141**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1408 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AHN, ROGER, , ,**

Mailing Address 2807 NORTH 160 STREET

City  
OMAHAState  
NEZip Code  
68116-2061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660312

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AHN, ROGER, , ,**

Mailing Address 2807 NORTH 160 STREET

City  
OMAHAState  
NEZip Code  
68116-2061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660315

Amount of Each Receipt this Period

6.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AHN, ROGER, , ,**

Mailing Address 2807 NORTH 160 STREET

City  
OMAHAState  
NEZip Code  
68116-2061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

373.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660324

Amount of Each Receipt this Period

14.57

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1409 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AIGNER, PETER, , ,**

Mailing Address 5601 SEGOLILLY CIRCLE

City  
LAS VEGASState  
NVZip Code  
89130-0137FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661187**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AL SHAHWANI, MOHAMMED, , ,**

Mailing Address 1801 BLUE MARBLE TER SE

City  
LEESBURGState  
VAZip Code  
20175-4760FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660272**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALBERS, GREGG, , ,**

Mailing Address 220 FOX BRIAR LN

City  
MADISON HEIGHTSState  
VAZip Code  
24572-2770FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CVFPOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

263.85

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661094**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1410 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALFARO, ROSA, , ,**

Mailing Address 3059 HAWKSCREST DR

City  
WINCHESTERState  
CAZip Code  
92596-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.59

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658449**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALFARO, ROSA, , ,**

Mailing Address 3059 HAWKSCREST DR

City  
WINCHESTERState  
CAZip Code  
92596-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.59

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659112**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMYX, PATRICIA, H., MRS.,**

Mailing Address 4382 N ROSEPOINT AVE

City  
MERIDIANState  
IDZip Code  
83646-3702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.31

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660347**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1411 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMYX, PATRICIA, H., MRS.,**

Mailing Address 4382 N ROSEPOINT AVE

City  
MERIDIANState  
IDZip Code  
83646-3702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.31

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660494**

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMYX, PATRICIA, H., MRS.,**

Mailing Address 4382 N ROSEPOINT AVE

City  
MERIDIANState  
IDZip Code  
83646-3702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.31

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660514**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, CYNNIE, , ,**

Mailing Address 55 RODEO AVENUE # 5

City  
SAUSALITOState  
CAZip Code  
94965-1738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

349.62

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658333**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

34.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1412 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.54

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660090**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.54

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660099**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.54

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660108**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1413 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, RANDY, H., MR.,**

Mailing Address 335 DEVONSHIRE DR.

City  
BREAState  
CAZip Code  
92821-6010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660183**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARGYRAKIS, PAT, , ,**

Mailing Address 11 SOUTH WILLE STREET

City

MOUNT PROSPECT

State

IL

Zip Code

60056-3111

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DEEP SEAS CYBERSECURITYOccupation (for Individual)  
SECURITY STRATEGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658645**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ARGYRAKIS, PAT, , ,**

Mailing Address 11 SOUTH WILLE STREET

City

MOUNT PROSPECT

State

IL

Zip Code

60056-3111

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DEEP SEAS CYBERSECURITYOccupation (for Individual)  
SECURITY STRATEGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658653**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

258.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1414 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARGYRAKIS, PAT, , ,**

Mailing Address 11 SOUTH WILLE STREET

City  
MOUNT PROSPECTState  
ILZip Code  
60056-3111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DEEP SEAS CYBERSECURITYOccupation (for Individual)  
SECURITY STRATEGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658676

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAMERT, TOM, , ,**

Mailing Address BOX 336

City  
IONEState  
CAZip Code  
95640-0336FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1402.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658795

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAMERT, TOM, , ,**

Mailing Address BOX 336

City  
IONEState  
CAZip Code  
95640-0336FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1402.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658807

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

173.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1415 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARNETT, FRANCIS, V., MR.,**

Mailing Address 284 TIMBERLEAF DR

City  
BEAVERCREEKState  
OHZip Code  
45430-5107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DAYTON AEROSPACE, INC.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659634**

Amount of Each Receipt this Period

495.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARR, SUSAN, , ,**

Mailing Address 20151 PORT GREENWICH LANE

City  
HUNTINGTON BEACHState  
CAZip Code  
92646-4444FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661406**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARTONE, VIRGINIA, , ,**

Mailing Address 3009 MUMBARTO AVENUE

City  
BOISEState  
IDZip Code  
83713-5082FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

241.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659745**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

670.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1416 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAUMAN, LAWRENCE, , ,**

Mailing Address 4518 MOONLAKE RIDGE DRIVE

City  
CORPUS CHRISTIState  
TXZip Code  
78413-5017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COASTAL AG COOPOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660002**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEALL, JAMES, , ,**

Mailing Address 5267 TIMBER RACE COURSE

City  
HOLLYWOODState  
SCZip Code  
29449-8503FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659676**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEGO, DAVID, A., ,**

Mailing Address P.O. BOX 501796

City  
INDIANAPOLISState  
INZip Code  
46250-6796FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EMSOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659150**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1417 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEGO, DAVID, A., ,**

Mailing Address P.O. BOX 501796

City  
INDIANAPOLISState  
INZip Code  
46250-6796FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EMSOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660063**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BESWICK, JANE, ELIZABETH, MS.,**

Mailing Address PO BOX 153

City  
FRENCH CAMPState  
MSZip Code  
39745-0153FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658799**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BHATTI, M, ARSHAD, ,**

Mailing Address 2200 TREMONT ST. APT. 205

City  
PHILADELPHIAState  
PAZip Code  
19115-5022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

355.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660988**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1418 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659069

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659072

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

891.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659078

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1419 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLAHNIK, PATRICIA, C., ,**

Mailing Address 258 N WEST END BLVD, #312

City  
QUAKERTOWNState  
PAZip Code  
18951-2324FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.54

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659376**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOHLEN, LEE, , ,**

Mailing Address 6971 HERITAGE PARKWAY

City  
WESTState  
TXZip Code  
76691-2314FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.06

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658486**

Amount of Each Receipt this Period

1.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOHLEN, LEE, , ,**

Mailing Address 6971 HERITAGE PARKWAY

City  
WESTState  
TXZip Code  
76691-2314FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.06

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658530**

Amount of Each Receipt this Period

2.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1420 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOLING, JEANNE, , ,**

Mailing Address 5512 CHEVAUX COURT

City  
LITTLE ROCKState  
ARZip Code  
72223-4463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659071**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOULINEAU, EDWARD, C., MR.,**

Mailing Address 100 CIRCLE DR

City  
STATESBOROState  
GAZip Code  
30461-0578FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658890**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOWMAN, ROSEMARIE, , ,**

Mailing Address 233 MCLEOD AVE

City  
MISSOULAState  
MTZip Code  
59801-4303FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

385.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660270**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.25



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1421 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMASState  
ORZip Code  
97015-8629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2025

**Transaction ID : SA11A.27659120**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMASState  
ORZip Code  
97015-8629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2025

**Transaction ID : SA11A.27659324**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYD, BONNIE, J., ,**

Mailing Address 8656 SUNNYSLOPE DR.

City  
SAN GABRIELState  
CAZip Code  
91775-1129FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

858.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2025

**Transaction ID : SA11A.27660151**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1422 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BREWER, SHELBY, K., MRS.,**Mailing Address 5000 LAUNCH ST  
#124City  
GUNTERSVILLEState  
ALZip Code  
35976-2648FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661393**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROADHEAD, ANN, B., ,**

Mailing Address PO BOX 2348

City  
KILL DEVIL HILLSState  
NCZip Code  
27948-2348FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661161**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROADHEAD, ANN, B., ,**

Mailing Address PO BOX 2348

City  
KILL DEVIL HILLSState  
NCZip Code  
27948-2348FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

298.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661163**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1423 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.45

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659249**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, DENNIS, , ,**

Mailing Address 3022 REDWOOD AVENUE

City  
LAKELANDState  
FLZip Code  
33803-4345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

642.99

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661388**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, JENISE, , ,**

Mailing Address 10370 SW WESTLAWN BLVD

City  
PORT SAINT LUCIEState  
FLZip Code  
34987-2463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.25

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660677**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1424 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BROWN, MOLLIE, , ,

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658980

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BROWN, MOLLIE, , ,

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658982

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BROWN, MOLLIE, , ,

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658983

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1425 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658984

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658986

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658987

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1426 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658994

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27661063

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27661064

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

149.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1427 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661066**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661069**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661071**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.42



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1428 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661072**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661074**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661075**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1429 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRUMBAUGH, PHILIP, C., MR.,**

Mailing Address 108 PHILIP DR

City  
WEST MILTONState  
OHZip Code  
45383-1330FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.19

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658424**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUNN, KAY, , ,**

Mailing Address 1908 GAINESWOOD DR

City  
TUSCALOOSAState  
ALZip Code  
35406-3558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.15

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660811**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURGER, GARY, , ,**

Mailing Address 3803 SOUTH SANGRE ROAD

City  
STILLWATERState  
OKZip Code  
74074-2213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660511**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1430 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURR, LAWRENCE, , MR.,**

Mailing Address 31065 CASTLE RIDGE DRIVE

City  
BROOKSVILLEState  
FLZip Code  
34602-7529FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658465**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURR, LAWRENCE, , MR.,**

Mailing Address 31065 CASTLE RIDGE DRIVE

City  
BROOKSVILLEState  
FLZip Code  
34602-7529FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660044**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUSBY, CHARLOTTE, , ,**

Mailing Address 5110 BEECH ST

City  
BELLAIREState  
TXZip Code  
77401-3327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1628.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659228**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1431 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CALI, JOANNE, , ,**Mailing Address **5419 HOLLYWOOD BLVD**  
**C814**City  
**LOS ANGELES**State  
**CA**Zip Code  
**90027-3480**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**208.20**

Date of Receipt

**02 / 07 / 2025****Transaction ID : SA11A.27659452**

Amount of Each Receipt this Period

**156.15**☐ Memo Item**CONTRIBUTION****EARMARKED FROM WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CALI, JOANNE, , ,**Mailing Address **5419 HOLLYWOOD BLVD**  
**C814**City  
**LOS ANGELES**State  
**CA**Zip Code  
**90027-3480**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**208.20**

Date of Receipt

**02 / 07 / 2025****Transaction ID : SA11A.27660462**

Amount of Each Receipt this Period

**52.05**☐ Memo Item**CONTRIBUTION****EARMARKED FROM WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CARA, , ,**Mailing Address **804 ROSEBERRY RD**City  
**CARLISLE**State  
**KY**Zip Code  
**40311-9653**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**240.00**

Date of Receipt

**02 / 07 / 2025****Transaction ID : SA11A.27659013**

Amount of Each Receipt this Period

**35.00**☐ Memo Item**CONTRIBUTION****EARMARKED FROM WINRED****SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►**243.20**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1432 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CANTEY, RICHARD, , MR.,**

Mailing Address 23782 CONTINENTAL DR

City  
CANYON LAKEState  
CAZip Code  
92587-7754FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659301

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAPOCCIA, ANTHONY, , ,**

Mailing Address 5221 MASTERS CT

City  
MIDLOTHIANState  
TXZip Code  
76065-7201FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658749

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARISONE, ANTOINETTE, , ,**

Mailing Address 10 VITALE TRL

City  
GREEN BROOKState  
NJZip Code  
08812-1904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660074

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1433 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNEY, JOSEPH, , MR.,**

Mailing Address 1371 WELLAND DR.

City  
ROCHESTERState  
MIZip Code  
48306-4826FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.93

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660815**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARNEY, JOSEPH, , MR.,**

Mailing Address 1371 WELLAND DR.

City  
ROCHESTERState  
MIZip Code  
48306-4826FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.93

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660816**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNEY, JOSEPH, , MR.,**

Mailing Address 1371 WELLAND DR.

City  
ROCHESTERState  
MIZip Code  
48306-4826FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.93

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660822**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

55.18

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1434 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2025

**Transaction ID : SA11A.27658330**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2025

**Transaction ID : SA11A.27659061**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2025

**Transaction ID : SA11A.27659075**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1435 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARTER, CHRISTINE, , ,**

Mailing Address 2225 ARGONNE DR. NE

City  
MINNEAPOLIS

State  
MN

Zip Code  
55421-1319

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.37

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

**Transaction ID : SA11A.27658842**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARTER, CHRISTINE, , ,**

Mailing Address 2225 ARGONNE DR. NE

City  
MINNEAPOLIS

State  
MN

Zip Code  
55421-1319

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.37

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

**Transaction ID : SA11A.27658845**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARTER, CHRISTINE, , ,**

Mailing Address 2225 ARGONNE DR. NE

City  
MINNEAPOLIS

State  
MN

Zip Code  
55421-1319

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

435.37

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

**Transaction ID : SA11A.27658847**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

81.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1436 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARTER, CHRISTINE, , ,**

Mailing Address 2225 ARGONNE DR. NE

City  
MINNEAPOLISState  
MNZip Code  
55421-1319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.37

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658851**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARTER, CHRISTINE, , ,**

Mailing Address 2225 ARGONNE DR. NE

City  
MINNEAPOLISState  
MNZip Code  
55421-1319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.37

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658856**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CASPERSON, CAROLINA, , MS.,**

Mailing Address 100 SAINT PAUL ST, STE 700

City  
DENVERState  
COZip Code  
80206-5143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MUSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.18

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659269**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.62



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1437 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CASPERSON, CAROLINA, , MS.,**

Mailing Address 100 SAINT PAUL ST, STE 700

City  
DENVERState  
COZip Code  
80206-5143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MUSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660192**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658571**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAN, CECELIA, , ,**

Mailing Address 14568 CIRCLE BAR WAY

City  
NEVADA CITYState  
CAZip Code  
95959-9092FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

457.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658393**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1438 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANCELLOR CASE, NANCY, J., MS.,**Mailing Address 24001 CINCO VILLAGE CENTER BLVD  
APT 1134City  
KATYState  
TXZip Code  
77494-8420FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1082.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658927

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHAVERA, OFILIA, , ,**

Mailing Address 3100 TWISTED CREEK

City

SAN ANTONIO

State

TX

Zip Code

78230-4046

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1048.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27661345

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CIACCIO, JANE, , ,**Mailing Address 5491 BEECHMONT AVE  
APT 506

City

CINCINNATI

State

OH

Zip Code

45230-1160

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

841.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660973

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1439 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CIRCLE, RUTH ANN, , ,**

Mailing Address 3344 TIMBERLAKE RD NW

City  
KENNESAWState  
GAZip Code  
30144-1940FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658790**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, CHARLES, , ,**

Mailing Address 522 CLYDESDALE DRIVE

City  
NEW HOPEState  
PAZip Code  
18938-5816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658823**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLARK, CHARLES, , ,**

Mailing Address 522 CLYDESDALE DRIVE

City  
NEW HOPEState  
PAZip Code  
18938-5816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

277.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660449**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1440 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLARK, DAVID, , MR.,**

Mailing Address 32 WASHINGTON PARK

City  
NASHVILLEState  
TNZip Code  
37205-4733FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.10

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659910**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659673**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659675**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

138.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1441 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659678**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659684**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONIGLIO, JOHN, , ,**

Mailing Address 2660 SE FAIRMONT ST

City  
STUARTState  
FLZip Code  
34997-5260FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JAMIE UNDERGROUND INCOccupation (for Individual)  
UTILITY CONSTRUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.50

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659746**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

396.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1442 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONSTANTINE, RUSSELL, , ,**

Mailing Address 209 ROBIN HOOD DR

City  
COVINGTONState  
LAZip Code  
70433-4762FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.66

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658601**

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONSTANTINE, RUSSELL, , ,**

Mailing Address 209 ROBIN HOOD DR

City  
COVINGTONState  
LAZip Code  
70433-4762FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.66

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659384**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONUI, MADELEINE, O., MISS,**Mailing Address 620 SAND HILL RD.  
APT 105FCity  
PALO ALTOState  
CAZip Code  
94304-2614FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

279.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659492**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1443 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORBETT, ALTON, D., ,**

Mailing Address 581 HUNTINGTON DR.

City  
WEST COLUMBIAState  
SCZip Code  
29169-4409FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.80

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661232**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CORDRAY, GLORIA, , ,**

Mailing Address 19 WISTERIA LANE

City  
TROYState  
MOZip Code  
63379-4789FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.66

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659293**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORDRAY, GLORIA, , ,**

Mailing Address 19 WISTERIA LANE

City  
TROYState  
MOZip Code  
63379-4789FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

748.66

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659294**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

138.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1444 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORDRAY, GLORIA, , ,**

Mailing Address 19 WISTERIA LANE

City  
TROYState  
MOZip Code  
63379-4789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659295

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CORDRAY, GLORIA, , ,**

Mailing Address 19 WISTERIA LANE

City  
TROYState  
MOZip Code  
63379-4789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659298

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORDRAY, GLORIA, , ,**

Mailing Address 19 WISTERIA LANE

City  
TROYState  
MOZip Code  
63379-4789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

748.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659305

Amount of Each Receipt this Period

14.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

118.35



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1445 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORUM, SARAH, , ,**

Mailing Address 3258 DUNCAN AV

City  
CLOVISState  
CAZip Code  
93619-5006FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.61

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659314**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COURTNEY, JOHN, , ,**

Mailing Address 1298 SILVERWOOD DRIVE

City  
OKEMOSState  
MIZip Code  
48864-3092FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.36

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658361**

Amount of Each Receipt this Period

20.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIG, JUDY, , ,**

Mailing Address 4206 S. CANTAMAR DRIVE

City  
SAINT GEORGEState  
UTZip Code  
84790-4862FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

353.96

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658617**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1446 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIG, JUDY, , ,**

Mailing Address 4206 S. CANTAMAR DRIVE

City  
SAINT GEORGEState  
UTZip Code  
84790-4862FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660781

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIS, JUDY, L., MRS.,**

Mailing Address 405 KEYS LANE

City  
HEPHZIBAHState  
GAZip Code  
30815-5411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659288

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTONState  
IAZip Code  
50131-4796FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658577

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1447 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTONState  
IAZip Code  
50131-4796FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658581

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTONState  
IAZip Code  
50131-4796FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658656

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTONState  
IAZip Code  
50131-4796FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658657

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

237.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1448 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTONState  
IAZip Code  
50131-4796FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658660**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTONState  
IAZip Code  
50131-4796FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658671**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CROSTHWAITE, DENNIS, , ,**

Mailing Address 646 S. LA BELLOTA

City  
GREEN VALLEYState  
AZZip Code  
85614-2225FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660121**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

302.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1449 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CUMMINGS, DAN, , ,**

Mailing Address 10300 RED ROCK RD

City  
RENOState  
NVZip Code  
89508-8187FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659723**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CUOMO, ANTHONY, , MR.,**

Mailing Address 10167 GRANDVIEW DR.

City  
LA MESAState  
CAZip Code  
91941-6839FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PULMIDOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.90

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658345**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. D'OLIVE, JOE, , MR.,**

Mailing Address 6136 HALEY LN

City  
FORT WORTHState  
TXZip Code  
76132-3875FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

452.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659687**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1450 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAHIN, JOHN, , ,**

Mailing Address 224 RIDGEWOOD ST

City  
ALTAMONTE SPRINGSState  
FLZip Code  
32701-7613FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659092**

Amount of Each Receipt this Period

19.84

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659147**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DARLING, GARY, , ,**

Mailing Address 501 E GUIDRY ST

City  
COVINGTONState  
LAZip Code  
70433-3942FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

568.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659813**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1451 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659937

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27661358

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEAL, JERRY, , ,**

Mailing Address 2929 ONATE ROAD

City  
LAS CRUCESState  
NMZip Code  
88007-8117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

343.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658405

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1452 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEPUY, GALE, , ,**

Mailing Address 13145 ST RT 26

City  
MARIETTAState  
OHZip Code  
45750-7714FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.02

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661321**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DESSAUER, MARILYNN, , ,**

Mailing Address 8679 BLUE FLAG WAY

City  
NAPLESState  
FLZip Code  
34109-4300FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.61

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658852**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIAS PINTO, CHERYL, , ,**

Mailing Address 4831 S KILPATRICK AVENUE

City  
CHICAGOState  
ILZip Code  
60632-4828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.69

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660235**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.21



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1453 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIXON, JOSEPH, , ,**

Mailing Address 2414 NORTHERN OAK DR

City  
BRASELTONState  
GAZip Code  
30517-6057FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658686**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOBSON, SANDRA, ELAINE, MS.,**

Mailing Address 6106 SOURWOOD WAY

City  
BARTOWState  
FLZip Code  
33830-9761FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660938**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOKKEN, KENNETH, , ,**

Mailing Address 12513 44TH DRIVE SOUTHEAST

City  
EVERETTState  
WAZip Code  
98208-9003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660762**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1454 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DONOVAN, ANNE, , ,**

Mailing Address 4 WEDGE LANE

City  
SELDENState  
NYZip Code  
11784-3309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659493**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DONOVAN, ANNE, , ,**

Mailing Address 4 WEDGE LANE

City  
SELDENState  
NYZip Code  
11784-3309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659534**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOW, GREG, , ,**

Mailing Address P.O. BOX 1040

City  
RICHLANDState  
WAZip Code  
99352-1040FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

484.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660877**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

16.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1455 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOW, GREG, , ,**

Mailing Address P.O. BOX 1040

City  
RICHLANDState  
WAZip Code  
99352-1040FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660878**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUGAS, MATTHEW, P., MR.,**

Mailing Address 11 WILDFLOWER PLACE

City  
NORTH OAKSState  
MNZip Code  
55127-6223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARCOccupation (for Individual)  
ARC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660277**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUMAS, EDWIN, , ,**

Mailing Address 425 RUSTIC OAKS RD

City  
SEAGOVILLEState  
TXZip Code  
75159-5612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661007**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1456 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNCAN, ALBERT, , ,**

Mailing Address 3318 DAWN DR

City  
MIDLANDState  
MIZip Code  
48642-4091FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.88

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660623**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNCAN, MARGARET, G., MS.,**

Mailing Address 3 FUDORA CIR

City  
SIMPSONVILLEState  
SCZip Code  
29681-5674FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.92

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660564**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNCAN, MARGARET, G., MS.,**

Mailing Address 3 FUDORA CIR

City  
SIMPSONVILLEState  
SCZip Code  
29681-5674FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

480.92

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660566**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1457 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNCAN, MARGARET, G., MS.,**

Mailing Address 3 FUDORA CIR

City  
SIMPSONVILLEState  
SCZip Code  
29681-5674FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.92

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660567**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNCAN, MARGARET, G., MS.,**

Mailing Address 3 FUDORA CIR

City  
SIMPSONVILLEState  
SCZip Code  
29681-5674FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.92

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660569**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNCAN, PEGGY, , ,**

Mailing Address 327 S. GLENWOOD DRIVE

City  
EL CENTROState  
CAZip Code  
92243-5557FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659705**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

160.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1458 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUPUIS, DANIELLE, , MS.,**

Mailing Address 153 8TH ST

City  
WIND GAPState  
PAZip Code  
18091-1023FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CENTURY WIRE PRODUCTS CORP.Occupation (for Individual)  
OWNER/PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.91

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02		07		2025

**Transaction ID : SA11A.27660669**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EACK, CRYSTAL, , ,**

Mailing Address 691 IONE AVENUE NORTHEAST

City  
SPRING LAKE PARKState  
MNZip Code  
55432-1146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02		07		2025

**Transaction ID : SA11A.27661408**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EADES, LINDA, , ,**

Mailing Address 14250 STATE ROUTE JJ

City  
WEST PLAINSState  
MOZip Code  
65775-5834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02		07		2025

**Transaction ID : SA11A.27661335**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1459 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EADES, LINDA, , ,**

Mailing Address 14250 STATE ROUTE JJ

City  
WEST PLAINSState  
MOZip Code  
65775-5834FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27661337

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660701

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EDWARDS, ERVIN, , MR.,**

Mailing Address 105 RAVENS LNDG

City  
FAYETTEVILLEState  
GAZip Code  
30215-4699FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

439.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658964

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1460 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EDWARDS, ERVIN, , MR.,**

Mailing Address 105 RAVENS LNDG

City  
FAYETTEVILLEState  
GAZip Code  
30215-4699FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.33

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658985**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EKSTROM, MEGAN, , ,**

Mailing Address 2909 COAST LINE CT

City  
LAS VEGASState  
NVZip Code  
89117-3525FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.32

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659864**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.56

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658514**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

195.76



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1461 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658517

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658519

Amount of Each Receipt this Period

27.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.56

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658523

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.42

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1462 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658529**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENDO, YOI, , ,**

Mailing Address 1273 ALA NAPUNANI ST.

City  
HONOLULUState  
HIZip Code  
96818-1626FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.60

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660252**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENDO, YOI, , ,**

Mailing Address 1273 ALA NAPUNANI ST.

City  
HONOLULUState  
HIZip Code  
96818-1626FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

445.60

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660255**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

99.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1463 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ENDO, YOI, , ,

Mailing Address 1273 ALA NAPUNANI ST.

City  
HONOLULUState  
HIZip Code  
96818-1626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660257

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ENDO, YOI, , ,

Mailing Address 1273 ALA NAPUNANI ST.

City  
HONOLULUState  
HIZip Code  
96818-1626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660267

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ENGBRETSON, MIRIAM, , ,

Mailing Address 13101 SCOTTIE CT

City  
ANCHORAGEState  
AKZip Code  
99515-3855FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659418

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

186.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1464 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ESTEFANO, JOSE, , ,**

Mailing Address 1900 N. BAYSHORE DR.

City  
MIAMIState  
FLZip Code  
33132-3001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RESOURCES R USOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.80

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27660829

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EVANS, LORETTA, , ,**

Mailing Address 450 N. KROCKS RD/ UNIT 331

City  
ALLENTOWNState  
PAZip Code  
18106-8934FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658753

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EVANS, RAYMOND, E., MR.,**

Mailing Address 98 MOZART COURT

City  
EASTPORTState  
NYZip Code  
11941-1600FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659302

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

147.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1465 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EVERETT, BARRY, , ,**

Mailing Address 1503 LINCOLN CREEK RD

City  
ROCHESTERState  
WAZip Code  
98579-8922FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658720**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661445**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

605.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661454**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

126.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1466 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAUBION, DEBI, , ,**

Mailing Address 1733 NORMAL HILL

City  
EDMONDState  
OKZip Code  
73034-4992FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KNOWLEDGE CONSULTANTSOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.05

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658942**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FAUBION, DEBI, , ,**

Mailing Address 1733 NORMAL HILL

City  
EDMONDState  
OKZip Code  
73034-4992FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KNOWLEDGE CONSULTANTSOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.05

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658948**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISCHER, STEPHEN, M., MR.,**

Mailing Address 17520 LAKESEdge TRAIL

City  
CHAGRIN FALLSState  
OHZip Code  
44023-2115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

832.05

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658712**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1467 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISHER, GARY, , ,**

Mailing Address 119 PASEO ARAGON

City  
SANTA FEState  
NMZip Code  
87506-2148FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660891**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLEGENHEIMER, MARK, , ,**

Mailing Address 3494 VANGUARD DR.

City  
FRISCOState  
TXZip Code  
75034-6678FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.18

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661106**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLETCHER, DEIRDRE, , ,**

Mailing Address 913 HOLLEY LAKE RD

City  
AIKENState  
SCZip Code  
29803-2625FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

394.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659759**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1468 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLICKENSCHILD, CONRAD, W., MR.,**

Mailing Address 6 LINDEN DRIVE

City  
WALDENState  
NYZip Code  
12586-1308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

534.36

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660768**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLOYD, JOHN, D., ,**

Mailing Address 3418 NORTHBORO CT.

City  
MURFREESBOROState  
TNZip Code  
37129-1208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.08

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660522**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FORE, HOWARD, , ,**

Mailing Address 769 MAGNOLIA STREET

City  
MONTICELLOState  
GAZip Code  
31064-4563FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

258.78

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660366**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.52



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1469 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORTUNATO, VINCENT, , ,**Mailing Address **5444 YAEGER COURT**City  
**SAINT LOUIS**State  
**MO**Zip Code  
**63129-3067**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**PREMIER MEDICAL PHYSICIANS**Occupation (for Individual)  
**PHYSICIAN**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**270.00**

Date of Receipt

**02 / 07 / 2025****Transaction ID : SA11A.27659576**

Amount of Each Receipt this Period

**50.00**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FOX, JOHN, , ,**Mailing Address **3724 WAINFLEET DRIVE**City  
**RICHMOND**State  
**VA**Zip Code  
**23235-1764**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**606.41**

Date of Receipt

**02 / 07 / 2025****Transaction ID : SA11A.27661309**

Amount of Each Receipt this Period

**78.08**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANK, ANDREW, , ,**Mailing Address **447 CHAPARRAL DR.**City  
**FOLSOM**State  
**CA**Zip Code  
**95630-6172**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**917.57**

Date of Receipt

**02 / 07 / 2025****Transaction ID : SA11A.27659208**

Amount of Each Receipt this Period

**3.12**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►**131.20**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1470 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRANK, ANDREW, , ,

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659478

Amount of Each Receipt this Period

6.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRANK, ANDREW, , ,

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27661455

Amount of Each Receipt this Period

7.29

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRANK, ANDREW, , ,

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27661464

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

17.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1471 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRANKLIN, GLENDA, , ,**

Mailing Address 1484 OLD RAY CITY ROAD

City  
NASHVILLEState  
GAZip Code  
31639-6608FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.40

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27661238

Amount of Each Receipt this Period

492.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FREY, MARTIN, C., ,**

Mailing Address 79276 SIENA DR

City  
BERMUDA DUNESState  
CAZip Code  
92203-8064FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.32

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27661228

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FREY, MARTIN, C., ,**

Mailing Address 79276 SIENA DR

City  
BERMUDA DUNESState  
CAZip Code  
92203-8064FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

323.32

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27661229

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

536.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1472 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FREY, MARTIN, C., ,**

Mailing Address 79276 SIENA DR

City  
BERMUDA DUNESState  
CAZip Code  
92203-8064FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661233**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALETAR, JUDY, , ,**

Mailing Address 100 TIMBERLANE DR

City  
CARTHAGEState  
TXZip Code  
75633-2229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PANDA L COLLEGEOccupation (for Individual)  
EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659349**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALETAR, JUDY, , ,**

Mailing Address 100 TIMBERLANE DR

City  
CARTHAGEState  
TXZip Code  
75633-2229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PANDA L COLLEGEOccupation (for Individual)  
EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

288.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659549**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

126.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1473 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLOWAY, JIM, , ,**

Mailing Address 6308 PARK AVENUE

City  
ATLANTAState  
GAZip Code  
30342-2362FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.86

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659443

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GARLICK, KAREN, , ,**

Mailing Address 6481 N. LEAD AVENUE

City  
FRESNOState  
CAZip Code  
93711-1028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.13

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659122

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GARLICK, KAREN, , ,**

Mailing Address 6481 N. LEAD AVENUE

City  
FRESNOState  
CAZip Code  
93711-1028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.13

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659134

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1474 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GARLICK, KAREN, , ,**

Mailing Address 6481 N. LEAD AVENUE

City  
FRESNOState  
CAZip Code  
93711-1028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660730**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GERGEN-WISNER, MICHELLE , , ,**

Mailing Address P.O. BOX 368

City  
ESTES PARKState  
COZip Code  
80517-0368FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660337**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIBSON, JOYCE, , ,**

Mailing Address 1701 HOPEMAN PARKWAY

City  
WAYNESBOROState  
VAZip Code  
22980-1970FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661212**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

93.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1475 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIFFORD, KEVIN, , ,**

Mailing Address 786 HORNET DRIVE

City  
GARDNERVILLEState  
NVZip Code  
89460-8323FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659515**

Amount of Each Receipt this Period

150.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILBERT, AUSTIN, , ,**

Mailing Address P.O. BOX 3009

City  
FLORENCEState  
SCZip Code  
29502-3009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GILBERT CONSTRUCTIONOccupation (for Individual)  
BUILDING CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659978**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILBERSTADT, MICHAEL, , ,**

Mailing Address 23761 HOBART BAY

City  
DANA POINTState  
CAZip Code  
92629-4408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660141**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

349.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1476 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILSTRAP, JAMES, C., MR.,**

Mailing Address 221 ESTELLE LANE

City  
LUCASState  
TXZip Code  
75002-7741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

731.13

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658518**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILSTRAP, JAMES, C., MR.,**

Mailing Address 221 ESTELLE LANE

City  
LUCASState  
TXZip Code  
75002-7741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

731.13

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658576**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIORDANO, MICHAEL, , ,**

Mailing Address 59 YOWAGO AVE

City  
BRANFORDState  
CTZip Code  
06405-5526FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIORDANOOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3029.95

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658762**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

41.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1477 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660220**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLUECKERT, MARK, J., MR.,**

Mailing Address 3088 HOURGLASS PL.

City  
BROOMFIELDState  
COZip Code  
80023-8025FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MOLSON COORS BEVERAGEOccupation (for Individual)  
IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658874**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GONZALEZ-BOHORQUEZ, FELIX, E., ,**

Mailing Address 827 BOWIE ROAD

City  
ROCKVILLEState  
MDZip Code  
20852-1042FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.77

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660838**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1478 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOOD, BRENDA, , ,**

Mailing Address 1213 WARWICK DR.

City  
MIAMISBURGState  
OHZip Code  
45342-3250FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.55

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659172**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOTTLIEB, STEPHEN, , ,**

Mailing Address 705 CORELLI COVE ST

City  
HENDERSONState  
NVZip Code  
89011-5523FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.88

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660104**

Amount of Each Receipt this Period

8.68

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, CALVIN, , ,**

Mailing Address 1601 LEXINGTON RD

City  
PLEASANT HILLState  
MOZip Code  
64080-1123FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LSR7Occupation (for Individual)  
BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

570.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659718**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48.89

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1479 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, LINDA, , ,**

Mailing Address 15657 FM 244

City  
IOLAState  
TXZip Code  
77861-3867FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.70

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660393**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City

YORKTOWN HEIGHTS

State

NY

Zip Code

10598-2323

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.48

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658758**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROKULSKY, YVONNE, , ,**

Mailing Address 12772 BAY PLANTATION DRIVE

City

JACKSONVILLE

State

FL

Zip Code

32223-0784

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ST. JOSEPH CATHOLIC SCHOOLOccupation (for Individual)  
2ND GRADE AIDE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658732**

Amount of Each Receipt this Period

80.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1480 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRUENDEL, LIZ, , ,**

Mailing Address 460 COUNTY ROAD 5170

City  
SALEMState  
MOZip Code  
65560-7302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1090.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658433

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRUENDEL, LIZ, , ,**

Mailing Address 460 COUNTY ROAD 5170

City  
SALEMState  
MOZip Code  
65560-7302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1090.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658483

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRUENDEL, LIZ, , ,**

Mailing Address 460 COUNTY ROAD 5170

City  
SALEMState  
MOZip Code  
65560-7302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1090.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659921

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1481 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAAS, RICHARD, , ,**

Mailing Address 318BOCA DEL CANON

City  
SAN CLEMENTEState  
CAZip Code  
92672-5402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660412

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAAS, RICHARD, , ,**

Mailing Address 318BOCA DEL CANON

City  
SAN CLEMENTEState  
CAZip Code  
92672-5402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660413

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAISLER, SHIRLEY, A., MS.,**

Mailing Address 1200 COWLING RD

City  
SANGERState  
TXZip Code  
76266-9084FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

307.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659276

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1482 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HALL, CATHERINE, , ,**

Mailing Address 6825 GRAND AVE

City  
DOWNERS GROVEState  
ILZip Code  
60516-3652FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660055**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HALL, CATHERINE, , ,**

Mailing Address 6825 GRAND AVE

City  
DOWNERS GROVEState  
ILZip Code  
60516-3652FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660089**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HALL, JOHN, , ,**

Mailing Address 5064 GREEN KNOLLS LN.

City  
ANN ARBORState  
MIZip Code  
48103-1415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

547.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659839**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

240.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1483 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALL, JOHN, , ,

Mailing Address 5064 GREEN KNOLLS LN.

City  
ANN ARBORState  
MIZip Code  
48103-1415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659850

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALL, JOHN, , ,

Mailing Address 5064 GREEN KNOLLS LN.

City  
ANN ARBORState  
MIZip Code  
48103-1415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659855

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALL, JOHN, , ,

Mailing Address 5064 GREEN KNOLLS LN.

City  
ANN ARBORState  
MIZip Code  
48103-1415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

547.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659862

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

101.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1484 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HALL, JOHN, , ,**

Mailing Address 5064 GREEN KNOLLS LN.

City  
ANN ARBORState  
MIZip Code  
48103-1415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.24

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659875**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HALL, JOHN, , ,**

Mailing Address 5064 GREEN KNOLLS LN.

City  
ANN ARBORState  
MIZip Code  
48103-1415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.24

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659902**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMBY, CAROLYN, T., MS.,**

Mailing Address 685 W KITCHEN DR.

City  
PORT NECHESState  
TXZip Code  
77651-5321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

456.04

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660810**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

178.45



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1485 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMBY, CAROLYN, T., MS.,**

Mailing Address 685 W KITCHEN DR.

City  
PORT NECHESState  
TXZip Code  
77651-5321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.04

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661076**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMBY, CAROLYN, T., MS.,**

Mailing Address 685 W KITCHEN DR.

City  
PORT NECHESState  
TXZip Code  
77651-5321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.04

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661082**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMLIN, DENNIS, , ,**

Mailing Address 18735 CORSINI DRIVE

City  
SAN ANTONIOState  
TXZip Code  
78258-1629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

624.04

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659007**

Amount of Each Receipt this Period

16.66

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1486 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMM, RUTH, , ,**

Mailing Address 275 MAYO DRIVE

City  
BULLARDState  
TXZip Code  
75757-9595FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660465

Amount of Each Receipt this Period

14.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMMONS, JOYCE, , ,**

Mailing Address 3525 NEW DELHI DR.

City  
WINSTON SALEMState  
NCZip Code  
27101-6211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658625

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMMONS, JOYCE, , ,**

Mailing Address 3525 NEW DELHI DR.

City  
WINSTON SALEMState  
NCZip Code  
27101-6211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

665.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659571

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

87.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1487 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANMER, GARY, , ,**

Mailing Address 3033 HARDING WAY

City  
COSTA MESAState  
CAZip Code  
92626-2852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.04

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659438**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSEN, TERESA, , ,**

Mailing Address 2917 , KANDAHAR DR

City  
SAINT CHARLESState  
MOZip Code  
63303-3166FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.03

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660959**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HANSON, BOB, , ,**

Mailing Address 1326 HICKORYCREEK CT.

City  
WICHITAState  
KSZip Code  
67235-7000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WEIGAND OMEGA MGTOccupation (for Individual)  
PROPERTY MGT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

841.35

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660773**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1488 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRIS, SUE, , MS.,**

Mailing Address 6768 SPENCER HWY STE A1

City  
PASADENAState  
TXZip Code  
77505-1726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THE HARRIS AGENCYOccupation (for Individual)  
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661119**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRIS, SUE, , MS.,**

Mailing Address 6768 SPENCER HWY STE A1

City  
PASADENAState  
TXZip Code  
77505-1726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THE HARRIS AGENCYOccupation (for Individual)  
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661123**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRIS, SUE, , MS.,**

Mailing Address 6768 SPENCER HWY STE A1

City  
PASADENAState  
TXZip Code  
77505-1726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THE HARRIS AGENCYOccupation (for Individual)  
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661127**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1489 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARROLD, JOHN, , ,**

Mailing Address 1829 LAUREL OAK DRIVE

City  
MODESTOState  
CAZip Code  
95354-1648FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.35

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659434**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660022**

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660026**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1490 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660036

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658743

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660178

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1491 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEFFLEBOWER, BARBARA, ANN, MS.,**

Mailing Address 4415 NEGAL CIR

City  
MELBOURNEState  
FLZip Code  
32901-8503FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658541**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEFFLEBOWER, BARBARA, ANN, MS.,**

Mailing Address 4415 NEGAL CIR

City  
MELBOURNEState  
FLZip Code  
32901-8503FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658558**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEGWER, ELLEN, R., MS.,**

Mailing Address 76504 VIA CHIANTI

City  
INDIAN WELLSState  
CAZip Code  
92210-7808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

607.13

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661443**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.71

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1492 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEISLER, KATHY, P., ,**

Mailing Address 1177 CLARENCE BARHAM RD

City  
BETHEL SPRINGSState  
TNZip Code  
38315-4527FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658560**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENRY, TED, , ,**

Mailing Address 3001 ROUTE 130, APT. 3K

City  
DELRANState  
NJZip Code  
08075-2614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DEPT OF TREASURYOccupation (for Individual)  
QC TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659139**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERROLD, BARBARA, J., MRS.,**

Mailing Address 3738 MARSBELLA PL

City  
KALAMAZOOState  
MIZip Code  
49006-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
K O PRODUCTSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1029.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658503**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.38



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1493 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERROLD, BARBARA, J., MRS.,**

Mailing Address 3738 MARSBELLA PL

City  
KALAMAZOOState  
MIZip Code  
49006-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
K O PRODUCTSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658713

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEWETT, WILLIAM, , MR.,**

Mailing Address 8920 E QUAIL COVE LN

City  
GOLD CANYONState  
AZZip Code  
85118-3009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658884

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659866

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1494 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659867**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659870**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.79

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659175**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1495 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659179

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659182

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659193

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

61.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1496 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.79

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659196**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.79

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659206**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLMAN, PATRICK, , ,**

Mailing Address 34 HUNTERSTOWN ROAD

City  
GERMANTOWNState  
NYZip Code  
12526-5604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

522.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661384**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1497 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIPP, CHARLES, R., ,**

Mailing Address 4226 ROBERTS RD

City  
KERSHAWState  
SCZip Code  
29067-8761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.99

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660411**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOFFMAN, GARY, , ,**

Mailing Address 10561 HAWKS LANDING TERRACE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3106FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660687**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLMES, SANDRA, , ,**

Mailing Address P.O. BOX 6905

City  
LAGUNA NIGUELState  
CAZip Code  
92607-6905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

577.78

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659027**

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1498 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLMES, SANDRA, , ,**

Mailing Address P.O. BOX 6905

City  
LAGUNA NIGUELState  
CAZip Code  
92607-6905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.78

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659033**

Amount of Each Receipt this Period

1.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658840**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658875**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

21.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1499 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659330**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659482**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660322**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1500 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660787**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBBARD, BARBARA, A., MS.,**

Mailing Address P.O. BOX 1736

City  
LAS CRUCESState  
NMZip Code  
88004-1736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.41

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659638**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUGHES, KATHLEEN, B., MS.,**

Mailing Address 6400 N COUNTY 75 RD

City  
COLUMBIAState  
ALZip Code  
36319-5124FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

243.45

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658706**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1501 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUNTER, HOLLAND, , ,**

Mailing Address 2360 YUCCA DR.

City  
CAMARILLOState  
CAZip Code  
93012-8250FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ST. AUGUSTINE ACADEMYOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659708**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659683**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. INGRAM, DALE, , ,**

Mailing Address 2255 TRISTRAM ROAD

City  
CHATTANOOGAState  
TNZip Code  
37421-2639FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ERLANGER MEDICAL CENTEROccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.49

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659930**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1502 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.79

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661214**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JENNINGS, SUSAN, , ,**

Mailing Address 722 CALLE PERLINO

City  
SAN CLEMENTEState  
CAZip Code  
92673-2718FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.50

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659752**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JENSEN, STEVEN, , ,**

Mailing Address 2012 LAUDERDALE ROAD

1

City  
LOUISVILLEState  
KYZip Code  
40205-1548FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658639**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 1503 OF 6441

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEWETT, STEVEN, , ,**

Mailing Address 31896 BIRCHWOOD DRIVE

City

LAKE ELSINORE

State

CA

Zip Code

92532-2628

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

**Transaction ID : SA11A.27660404**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JEWETT, STEVEN, , ,**

Mailing Address 31896 BIRCHWOOD DRIVE

City

LAKE ELSINORE

State

CA

Zip Code

92532-2628

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

**Transaction ID : SA11A.27660409**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON MORTON, VALERIE, , ,**

Mailing Address 3391 EAST ORANGE BLOSSOM WAY

City

ONTARIO

State

CA

Zip Code

91761-3926

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

2782.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

**Transaction ID : SA11A.27659005**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1504 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON MORTON, VALERIE, , ,**

Mailing Address 3391 EAST ORANGE BLOSSOM WAY

City  
ONTARIOState  
CAZip Code  
91761-3926FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2782.26

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659433**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, DORIS, C., MS.,**

Mailing Address 506 BROOKS VILLAGE DR.

City  
PENDERGRASSState  
GAZip Code  
30567-4629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.39

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660784**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.29

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659451**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

271.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1505 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659454

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659459

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, PAT, A., ,**

Mailing Address 5471 CEDAR BRANCH CIR.

City  
INDIANAPOLISState  
INZip Code  
46268-3925FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.99

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659409

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1506 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, TERRY, D., MR.,**

Mailing Address 110 DALTON AVE.

City  
LA JUNTAState  
COZip Code  
81050-1352FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661414**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAMINSKI, BARBARA, , ,**

Mailing Address 214 WATERFORD DR.

City  
EDISONState  
NJZip Code  
08817-1914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660587**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KARAM, ROBERT, S., MR.,**

Mailing Address 456 ROCK ST

City  
FALL RIVERState  
MAZip Code  
02720-3355FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KARAM FINANCIAL GROUPOccupation (for Individual)  
INSURANCE SALES, REAL ESTATE D

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660260**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

178.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1507 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KARAM, ROBERT, S., MR.,**

Mailing Address 456 ROCK ST

City  
FALL RIVERState  
MAZip Code  
02720-3355FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KARAM FINANCIAL GROUPOccupation (for Individual)  
INSURANCE SALES, REAL ESTATE C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660904**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEATING, B., ELEANOR, ,**

Mailing Address 7 BARBERS RD

City  
NORWICHState  
CTZip Code  
06360-9468FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.60

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660003**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEATING, B., ELEANOR, ,**

Mailing Address 7 BARBERS RD

City  
NORWICHState  
CTZip Code  
06360-9468FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

476.60

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660009**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

39.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1508 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEATING, B., ELEANOR, ,**

Mailing Address 7 BARBERS RD

City  
NORWICHState  
CTZip Code  
06360-9468FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.60

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660011**

Amount of Each Receipt this Period

1.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658420**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661222**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.35



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1509 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEEN, CHELISA, , ,**

Mailing Address 1380 JACKSTOWN RD

City  
PARISState  
KYZip Code  
40361-9142FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TRICO RESOURCES LLCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659465**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KELLER, DOUGLAS, , ,**

Mailing Address 2238 KINGSTON ROAD

City  
GRAND JUNCTIONState  
COZip Code  
81507-1222FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660821**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KERINS, MARY, , ,**

Mailing Address 127 74TH STREET

City  
NIAGARA FALLSState  
NYZip Code  
14304-4032FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659731**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1510 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KERINS, MARY, , ,**

Mailing Address 127 74TH STREET

City  
NIAGARA FALLSState  
NYZip Code  
14304-4032FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659737**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KERNS, DIANA, , ,**

Mailing Address 3529 CHELLEN DRIVE

City  
FARMERS BRANCHState  
TXZip Code  
75234-6621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660025**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEYES, ALAN, L., ,**

Mailing Address P.O. BOX 4606

City  
SEVIERVILLEState  
TNZip Code  
37864-4606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IAMTVOccupation (for Individual)  
INFORMATION MEDIA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

261.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659720**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1511 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEYES, ALAN, L., ,**

Mailing Address P.O. BOX 4606

City  
SEVIERVILLEState  
TNZip Code  
37864-4606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IAMTVOccupation (for Individual)  
INFORMATION MEDIA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.24

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660452**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KLOCK, MARY, , ,**

Mailing Address 5500 N 67TH PL

City  
PARADISE VALLEYState  
AZZip Code  
85253-5923FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.34

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660917**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNOWLES, KAREN, , ,**

Mailing Address 308 GRAVES DRIVE

City  
FORESTState  
VAZip Code  
24551-2622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CENTRA HEALTHOccupation (for Individual)  
SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

794.75

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659450**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1512 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOHLER, PATTI, , ,**

Mailing Address 105 CRAWLEY ST

City  
HUGHESVILLEState  
PAZip Code  
17737-1205FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.28

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660106**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661318**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOTHAPALLI, SRINIVASA, , ,**

Mailing Address 2501 JIMMY JOHNSON

City  
PORT ARTHURState  
TXZip Code  
77640-2000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.10

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659377**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

237.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1513 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOVATCH, INES, E., MS.,**

Mailing Address 16537 PENDIO DR.

City  
MONTVERDEState  
FLZip Code  
34756-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659344

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRAUSE, CAROLYN, , ,**Mailing Address 2100 CIRCLE DR.  
APT 221City  
SCOTTSBLUFFState  
NEZip Code  
69361-1778FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER/FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660300

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LACKNA, MICHAEL, , ,**

Mailing Address 210 MILKY WAY

City  
IRVINEState  
CAZip Code  
92618-8890FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PVGOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659241

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

187.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1514 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANCE, TERESA, , ,**

Mailing Address 2004 SIFIELD GREENS WAY

City  
SUN CITY CENTERState  
FLZip Code  
33573-7168FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.29

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659890**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANDESMAN, MARIA, A., MRS.,**

Mailing Address 920 PARK AVE. APT. 10A

City  
NEW YORKState  
NYZip Code  
10028-0369FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.48

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659674**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661104**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

19.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1515 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660382**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEVIS, RICHARD, E., MR.,**

Mailing Address 5225 OLD RIVER ROAD

City  
BAKERState  
FLZip Code  
32531-9302FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.13

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660052**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

967.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659042**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1516 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660658**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660671**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LITTLEJOHN, JAMES, , MR.,**

Mailing Address 950 GLENHILL DR.

City  
FREMONTState  
CAZip Code  
94539-5727FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.98

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660323**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1517 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIU, ARTHUR, , ,**

Mailing Address P.O. BOX 16669

City  
ENCINOState  
CAZip Code  
91416-6669FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660972

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOGAN, RODGER, , ,**

Mailing Address 10647 SKI CHASTE LN

City  
AXISState  
ALZip Code  
36505-4206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27661452

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOHR, STONY, , MS.,**

Mailing Address 105 BATTERY WAY

City  
PEACHTREE CITYState  
GAZip Code  
30269-2139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

337.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659645

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1518 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LONG, ROBERT, , ,**

Mailing Address 300 BELVEDERE ST

City  
CARLISLEState  
PAZip Code  
17013-3503FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.50

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659358**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOWRY, DIANE, , ,**

Mailing Address 9 WOODRIDGE RD

City  
MOULTRIEState  
GAZip Code  
31768-5815FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.03

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658991**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUCK, JOHN, , ,**

Mailing Address 38638 BOAT HOUSE DR.

City  
MURRIETAState  
CAZip Code  
92563-2583FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

319.18

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660584**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1519 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LYLES, RICHARD, A., ,**

Mailing Address 27211. MILLER. STREET

City  
PORT NECHESState  
TXZip Code  
77651-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658620**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LYONS, GEORGE, , ,**

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534-5242FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1658.27

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658767**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LYONS, GEORGE, , ,**

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534-5242FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1658.27

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659046**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

154.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1520 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LYONS, GEORGE, , ,**

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534-5242FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1658.27

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659094

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LYSTIG, CAROLYN, , ,**

Mailing Address 2155 6TH LANE SE, APT 206

City  
CAMBRIDGEState  
MNZip Code  
55008-2528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.58

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27660275

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACKENZIE, SCOTT, , ,**

Mailing Address 296 PLEASANT STREET

City  
PEMBROKEState  
MAZip Code  
02359-2805FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DTM PACKAGING LLCOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

318.82

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27661105

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1521 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAGRUDER, SHERYL, , ,**

Mailing Address 576 CONCORD LANE

City  
KALISPELLState  
MTZip Code  
59901-5111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1103.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659168

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAGRUDER, SHERYL, , ,**

Mailing Address 576 CONCORD LANE

City  
KALISPELLState  
MTZip Code  
59901-5111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1103.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659176

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARINARO, BARBARA, , ,**

Mailing Address 2368 SOUNDSIDE CT

City  
LELANDState  
NCZip Code  
28451-5700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

406.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660290

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1522 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARKOS, JOHN, , ,**

Mailing Address 12 LESLIE TER

City  
ROWLEYState  
MAZip Code  
01969-2338FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
YELL-O-GLOW CORPORATIONOccupation (for Individual)  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661111**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARLATT, MICHAEL, , ,**

Mailing Address P.O. BOX 1299

City  
RIVERSIDEState  
CAZip Code  
92502-1299FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THOMPSON COLEGATEOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.16

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659448**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARSH, BETH, , MRS.,**

Mailing Address 209 E PINE ST

City  
STRAFFORDState  
MOZip Code  
65757-9427FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
B. AND B. SALES CO.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658463**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

195.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1523 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTINSON, RODNEY, , ,**

Mailing Address 13531 W SKY HAWK DR.

City  
SUN CITY WESTState  
AZZip Code  
85375-5832FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.99

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660265**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.39

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659351**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

832.39

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659835**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1524 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATHEWS, ASTRIDA, , ,**

Mailing Address 26905 W WAHALLA LN

City  
BUCKEYEState  
AZZip Code  
85396-2337FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660224**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATHESON, MARILYN, , ,**

Mailing Address 1356 JACKSON ST

City  
BELOITState  
WIZip Code  
53511-5914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659700**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAY, ANNE, , ,**

Mailing Address 8940 EDGEWOOD DR.

City  
GAITHERSBURGState  
MDZip Code  
20877-1544FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659268**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.23



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1525 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MC DONALD, MELODY, L., MRS.,**

Mailing Address 1098 VERNIER PLACE

City  
STANFORDState  
CAZip Code  
94305-1027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.14

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659982**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCBRIDE, JIM, , ,**

Mailing Address 11525 CARNATION DUVALL RD NE

City  
CARNATIONState  
WAZip Code  
98014-9514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.99

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659878**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.36

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660159**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1526 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.36

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660198**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCGAVOCK, VICKI, , ,**

Mailing Address 4004 109TH ST

City  
LUBBOCKState  
TXZip Code  
79423-0880FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.36

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658967**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCLENDON, MARGARET, , ,**

Mailing Address 85 PHILLIPS ST.

City  
RICHLANDState  
GAZip Code  
31825-6255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

9626.40

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661098**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1527 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCMICHAEL, RONDA, , ,**

Mailing Address 2 HERITAGE WAY

City  
OXFORDState  
ALZip Code  
36203-3942FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WISE ENVIROMENTALOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660351**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEADEN, THOMAS, , ,**

Mailing Address 24 ENGINE CREEK CT

City

DURANGO

State

CO

Zip Code

81301-8593

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661027**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEIER, CURT, E., MR.,**

Mailing Address 4721 RD 18

City

LAGRANGE

State

WY

Zip Code

82221-8410

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STATE OF WYOOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658509**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

211.79

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1528 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEIER, CURT, E., MR.,**

Mailing Address 4721 RD 18

City  
LAGRANGEState  
WYZip Code  
82221-8410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE OF WYOOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658510**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MELCHER, STEPHEN, , ,**

Mailing Address 2013 OKMULGEE LN

City  
CROSSVILLEState  
TNZip Code  
38572-3439FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659824**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MENDEZ, SAM, D., MR.,**

Mailing Address 11714 RAINDROP DR.

City  
SAN ANTONIOState  
TXZip Code  
78216-3103FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661057**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

234.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1529 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. METHENY, WILLIAM, , ,**

Mailing Address P.O. BOX 414

City  
BRIDGERState  
MTZip Code  
59014-0414FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659743

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. METHENY, WILLIAM, , ,**

Mailing Address P.O. BOX 414

City  
BRIDGERState  
MTZip Code  
59014-0414FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659935

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIDDLETON, JOHN, , ,**

Mailing Address 712 RIDGE RD

City  
HIGHLAND PARKState  
ILZip Code  
60035-3834FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

429.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659685

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1530 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, CLIFFORD, , ,**

Mailing Address 332 BERRYSBURG RD

City  
MILLERSBURGState  
PAZip Code  
17061-1401FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.97

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658829**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, CLIFFORD, , ,**

Mailing Address 332 BERRYSBURG RD

City  
MILLERSBURGState  
PAZip Code  
17061-1401FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.97

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658835**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, WARD, , ,**

Mailing Address 380 OXEN TRL

City  
FREDERICKSBURGState  
TXZip Code  
78624-6613FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.10

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658397**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1531 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, WAYNE, , ,**

Mailing Address 112 W AGARITA AVE

City  
SAN ANTONIOState  
TXZip Code  
78212-2925FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.44

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660122**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MINNEMAN, GAIL, , MS.,**

Mailing Address 650 COUNTRY CLUB DR

City  
BATTLE CREEKState  
MIZip Code  
49015-3651FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTOMOBILE DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.56

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660769**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MINNEMAN, GAIL, , MS.,**

Mailing Address 650 COUNTRY CLUB DR

City  
BATTLE CREEKState  
MIZip Code  
49015-3651FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTOMOBILE DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.56

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660779**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1532 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.52

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660349**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOFFETT, MARY, , ,**

Mailing Address 2170 HEMPILL DRIVE

City  
JENAState  
LAZip Code  
71342-4242FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.33

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660990**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOLINA, JOSEPH, R., ,**

Mailing Address 7500 SW 6 ST

City  
MIAMIState  
FLZip Code  
33155-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.09

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660325**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.55



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1533 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661196**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTECILLO, NICASIO, , , JR.**

Mailing Address 15 STUYVESANT OVAL APT 6H

City  
NEW YORKState  
NYZip Code  
10009-2019FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MOUNT SINAI BETH ISRAEL MEDICAL CENTEROccupation (for Individual)  
CLINICAL LABORATORY TECHNOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659778**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTECILLO, NICASIO, , , JR.**

Mailing Address 15 STUYVESANT OVAL APT 6H

City  
NEW YORKState  
NYZip Code  
10009-2019FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MOUNT SINAI BETH ISRAEL MEDICAL CENTEROccupation (for Individual)  
CLINICAL LABORATORY TECHNOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659786**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1534 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOODY, JO, ANN, ,**

Mailing Address 507 POWER DR.

City  
DUNCANVILLEState  
TXZip Code  
75116-3721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660193

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOORMAN, FRANCES, S., MRS.,**

Mailing Address 11207 BUSHIRE DRIVE

City  
DALLASState  
TXZip Code  
75229-4106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27661332

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORASKI, ROBERT, L., ,**

Mailing Address 1565 LONG CREEK RD

City  
GREENEVILLEState  
TNZip Code  
37743-8259FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

998.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658870

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1535 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORRIS, GEORGE, S., MR.,**

Mailing Address P.O. BOX 3698

City  
PINETOPState  
AZZip Code  
85935-3698FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659267

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORRICAL, PATRICIA, K., ,**

Mailing Address 5682 COUNTRY LAKES DR

City  
SARASOTAState  
FLZip Code  
34243-3811FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660381

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOUNTEER, FAYE, , ,**

Mailing Address 9985N 5320 W

City  
HIGHLANDState  
UTZip Code  
84003-3501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

529.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660031

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1536 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOUNTEER, FAYE, , ,**

Mailing Address 9985N 5320 W

City  
HIGHLANDState  
UTZip Code  
84003-3501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660034

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOUNTEER, FAYE, , ,**

Mailing Address 9985N 5320 W

City  
HIGHLANDState  
UTZip Code  
84003-3501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660040

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOUNTEER, FAYE, , ,**

Mailing Address 9985N 5320 W

City  
HIGHLANDState  
UTZip Code  
84003-3501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

529.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660053

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1537 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUELLER, SUSAN, , ,**

Mailing Address 1242 EAST AVENIDA HERMOSA

City  
PHOENIXState  
AZZip Code  
85014-2910FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.72

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660706**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MULAR, KATHLEEN, , ,**

Mailing Address 8215 BUNTON ROAD

City  
WILLISState  
MIZip Code  
48191-9501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PARKWAY SERVICES INCOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.18

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661347**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MULAR, KATHLEEN, , ,**

Mailing Address 8215 BUNTON ROAD

City  
WILLISState  
MIZip Code  
48191-9501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PARKWAY SERVICES INCOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

825.18

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661348**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1538 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MULAR, KATHLEEN, , ,**

Mailing Address 8215 BUNTON ROAD

City  
WILLISState  
MIZip Code  
48191-9501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PARKWAY SERVICES INCOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.18

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661349**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MULHORN, SHIRLEY, , MS.,**

Mailing Address 875 TEMPLE RD.

City  
CLANTONState  
ALZip Code  
35045-8430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

617.56

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660241**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURPHY, STANWOOD, , , JR.**

Mailing Address POB 249

City  
FORTUNAState  
CAZip Code  
95540-0249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

451.84

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659223**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1539 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MYERS, LINDA, W., ,**

Mailing Address 11020 JUNIPER MESA ROAD

City  
LITTLE ROCKState  
CAZip Code  
93543-3600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661096**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEAL, LONNIE, DAVID, ,**

Mailing Address 7128 NORTH 63DRIVE

City  
GLENDALEState  
AZZip Code  
85301-2385FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.21

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660018**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSEN, PATRICIA, , ,**

Mailing Address 10026 LLEWELLYN COURT

City  
FAIRFAXState  
VAZip Code  
22032-2713FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DODOccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

510.30

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658628**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

223.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1540 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSEN, PATRICIA, , ,**

Mailing Address 10026 LLEWELLYN COURT

City  
FAIRFAXState  
VAZip Code  
22032-2713FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DODOccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.30

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659415**

Amount of Each Receipt this Period

7.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEWELL, LINDA, , ,**

Mailing Address 4324 SUMMER STAR LANE

City  
FORT WORTHState  
TXZip Code  
76244-4934FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.03

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659231**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NGUYEN, TOAN, , ,**

Mailing Address 472 ILCREST DR.

City  
HOUSTONState  
TXZip Code  
77042-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.42

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658786**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1541 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOYES, RITA, S., MRS.,**

Mailing Address 4070 FOUNDERS CLUB DR.

City  
SARASOTAState  
FLZip Code  
34240-1441FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.60

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661167**

Amount of Each Receipt this Period

3.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

589.96

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661185**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

589.96

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661203**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

23.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1542 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O'FLYNN, ARMINDA, , ,**

Mailing Address 12864 BISCAYNE BLVD

City  
N. MIAMIState  
FLZip Code  
33181-2007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

992.53

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660839**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O'LEARY, GREGORY, , ,**

Mailing Address 1784 N. SAN JOAQUIN STREET

City  
STOCKTONState  
CAZip Code  
95204-6016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COLLIERSOccupation (for Individual)  
INDUSTRIAL REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

746.70

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658754**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OAK, ALAN, , MR.,**

Mailing Address 5104 BONHAM RD

City  
OXFORDState  
OHZip Code  
45056-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

471.83

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659747**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

201.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1543 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OBERLENDER, JANICE, , ,**

Mailing Address 5533 PRESTWICK LANE

City  
DALLASState  
TXZip Code  
75252-4978FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

959.56

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659893

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, PATRICIA, , ,**

Mailing Address 243 OCEANO DRIVE

City  
LOS ANGELESState  
CAZip Code  
90049-4123FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.61

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659392

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ONEBANE, NEAL, , ,**

Mailing Address 205 WATERSIDE DR.

City  
LAFAYETTEState  
LAZip Code  
70503-5493FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NGO AVIATIONOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659410

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

239.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1544 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ORPHALI, VERONA, , ,**

Mailing Address 140 CANONWOOD DR.

City  
GLENDALEState  
CAZip Code  
91207-1055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONEOccupation (for Individual)  
HEALTH CARE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.87

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659289

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659238

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659239

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1545 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659242

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659244

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659251

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1546 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OTHOLD, CHARLES, W., MR.,**Mailing Address 5632 VAN NUYS BLVD  
#5City  
VAN NUYSState  
CAZip Code  
91401-4602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOCKHEED MARTIN AERONAUTICSOccupation (for Individual)  
ENGINEER RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659194

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OTHOLD, CHARLES, W., MR.,**Mailing Address 5632 VAN NUYS BLVD  
#5City  
VAN NUYSState  
CAZip Code  
91401-4602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOCKHEED MARTIN AERONAUTICSOccupation (for Individual)  
ENGINEER RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660899

Amount of Each Receipt this Period

114.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OWEN, WILLIAM, E., MR.,**

Mailing Address 481 S KEELER WOODS DR NW

City  
MARIETTAState  
GAZip Code  
30064-2027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

740.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659442

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

264.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1547 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAPPAS, MARY, ALICE, MS.,**

Mailing Address 1617 N FLAGLER DR APT 4A

City  
WEST PALM BEACHState  
FLZip Code  
33407-6506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658442**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARKS, JENNIE, , ,**

Mailing Address 386 W TROXELL RD

City  
OAK HARBORState  
WAZip Code  
98277-7909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660758**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658372**

Amount of Each Receipt this Period

1.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

16.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1548 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.11

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659183**

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.11

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659190**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.11

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659200**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6.23



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1549 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.11

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659212**

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660174**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660177**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1550 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660182**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRY JONES, JUDY, P., MS.,**Mailing Address 2950 MOUNT WILKINSON PKWY SE  
UNIT 816City  
ATLANTAState  
GAZip Code  
30339-3662FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

647.03

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658335**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERSON, JUDY, , ,**

Mailing Address 41 JOSIAH BARTLETT RD

City  
AMHERSTState  
NHZip Code  
03031-3050FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.28

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659703**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1551 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658468

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659871

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PHIPPS, ALLEN, M., MR.,**

Mailing Address 925 WHITEHALL LN

City  
REDWOOD CITYState  
CAZip Code  
94061-3686FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

736.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659232

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1552 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659816**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIERCE, HAROLD, , ,**

Mailing Address 2424 CAPTAIN COOK DRIVE

City  
ANCHORAGEState  
AKZip Code  
99517-1279FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659125**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIPITONE, CATHERINE, , ,**

Mailing Address 3929 BANDINI STREET

City  
SAN DIEGOState  
CAZip Code  
92103-1532FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5231.11

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659907**

Amount of Each Receipt this Period

5205.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5235.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1553 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PLANK, HEATHER, , ,**

Mailing Address PO BOX 5082

City  
SHERIDANState  
WYZip Code  
82801-1382FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

903.20

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658332**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PLENDERLEITH, GRACE, , ,**

Mailing Address 111 FALCON RIDGE DRIVE

City  
IRWINState  
PAZip Code  
15642-3094FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.57

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659769**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PLENDERLEITH, GRACE, , ,**

Mailing Address 111 FALCON RIDGE DRIVE

City  
IRWINState  
PAZip Code  
15642-3094FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.57

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659783**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1554 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PREMIO, TERRY, , ,**

Mailing Address 1409 EVERGREEN PARK DR. SW - 301

City  
OLYMPIAState  
WAZip Code  
98502-5827FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660153**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRENDERGAST, CECEIL, , ,**

Mailing Address 119-19-230 STREET

City

CAMBRIA HEIGHTS

State

NY

Zip Code

11411-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660866**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRINDLE, GLEN, , ,**

Mailing Address 942 DISCOVERY CIR NE

City

ISSAQUAH

State

WA

Zip Code

98029-6203

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPUOccupation (for Individual)  
FACILITY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661430**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1555 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.35

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659355

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.35

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659361

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

337.35

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659363

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

53.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1556 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659371

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PUERTA, AMANDA, , ,**

Mailing Address 10 GLENBROOK RD

City  
STAMFORDState  
CTZip Code  
06902-2977FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658670

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PUERTA, AMANDA, , ,**

Mailing Address 10 GLENBROOK RD

City  
STAMFORDState  
CTZip Code  
06902-2977FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

559.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658794

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

82.06



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1557 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PUERTA, AMANDA, , ,**

Mailing Address 10 GLENBROOK RD

City  
STAMFORDState  
CTZip Code  
06902-2977FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658806**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PUERTA, AMANDA, , ,**

Mailing Address 10 GLENBROOK RD

City  
STAMFORDState  
CTZip Code  
06902-2977FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659036**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. QUALEY, VALORIE, , ,**

Mailing Address 2958 SOUTHPARK

City  
PRESCOTTState  
AZZip Code  
86305-6417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660585**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1558 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAINEY, DAVID, L., MR.,**

Mailing Address 1791 RAMPART DR.

City  
ALEXANDRIAState  
VAZip Code  
22308-1655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659532**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAMIREZ, MARY, R., ,**

Mailing Address 5107 ENCANTA ST

City  
SAN ANTONIOState  
TXZip Code  
78233-5919FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658668**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RANDALL, HELEN, , ,**

Mailing Address 13249 SW 190TH ST

City  
ROSE HILLState  
KSZip Code  
67133-8519FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

442.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659554**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1559 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RATCHFORD, HERMAN, , ,**

Mailing Address 838 OATES RD

City  
BESSEMER CITYState  
NCZip Code  
28016-7572FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SOUTHWOOD REALTY COMPANYOccupation (for Individual)  
APARTMENT OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661159**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660218**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660223**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1560 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660236**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REAGAN, RONALD, C., ,**

Mailing Address 1783 FOUR MILE COVE PKWY

City  
CAPE CORALState  
FLZip Code  
33990-2409FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.95

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658507**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REAVIS, ROY, , ,**

Mailing Address 205 RUE SAINT BARTS

City  
YOUNGSVILLEState  
LAZip Code  
70592-5525FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

430.21

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661340**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1561 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REEDY, MARY, A., MS.,**

Mailing Address 213 WOODSIDE DR

City  
CHILHOWIEState  
VAZip Code  
24319-5896FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.99

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27661154

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REEDY, MARY, A., MS.,**

Mailing Address 213 WOODSIDE DR

City  
CHILHOWIEState  
VAZip Code  
24319-5896FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.99

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27661156

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REEDY, MARY, A., MS.,**

Mailing Address 213 WOODSIDE DR

City  
CHILHOWIEState  
VAZip Code  
24319-5896FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

460.99

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27661158

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

66.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1562 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REICHOW, GARY, , ,**

Mailing Address 5516 RIGEL COURT

City  
ATLANTIC BEACHState  
FLZip Code  
32233-4581FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.20

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661136**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REINHARD, ROSEMARIE, , MR.,**

Mailing Address 2755 FALCON STREET

City  
EAST MEADOWState  
NYZip Code  
11554-4318FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.15

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660489**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REISS, CLAIRE, K., MRS.,**Mailing Address 464 PROSPECT STREET  
UNIT 501City  
LA JOLLAState  
CAZip Code  
92037-4742FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1431.74

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660675**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1563 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REITER, RUSSEL, J., ,**

Mailing Address 14275 SAVANNAH PASS

City  
SAN ANTONIOState  
TXZip Code  
78216-7849FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE OF TEXASOccupation (for Individual)  
SCIENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661142**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REIZOVIC, ROY, , ,**

Mailing Address 8520 SUTTERFIELD DRIVE

City  
COLORADO SPRINGSState  
COZip Code  
80920-6204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.87

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660343**

Amount of Each Receipt this Period

5.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REYES, CATALINO, A., MR.,**

Mailing Address 1808 N KENMORE AVE

City  
LOS ANGELESState  
CAZip Code  
90027-4008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658425**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1564 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RHODES, ZOFIA, , ,**

Mailing Address P O BOX 2423

City  
BRYSON CITYState  
NCZip Code  
28713-2423FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27661169

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIBA, BRADLEY, A., MR.,**

Mailing Address 513 4TH AVE. NE

City  
SARTELLState  
MNZip Code  
56377-2123FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659135

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIBA, BRADLEY, A., MR.,**

Mailing Address 513 4TH AVE. NE

City  
SARTELLState  
MNZip Code  
56377-2123FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660186

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.88



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1565 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIBANDO, JOHN, , ,**

Mailing Address 1950 WILLOW RUN BLVD

City  
LEMARSState  
IAZip Code  
51031-8698FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.32

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659812**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIDDLE, KYRA, , ,**

Mailing Address 5454 ETHICS CT

City  
BARBERTONState  
OHZip Code  
44203-4655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.09

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658524**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659912**

Amount of Each Receipt this Period

0.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1566 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659915

Amount of Each Receipt this Period

0.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660963

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660966

Amount of Each Receipt this Period

0.45

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1567 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660968**

Amount of Each Receipt this Period

0.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RINN, ROGER, C., DR.,**

Mailing Address 1817 INSPIRATION LN SE

City  
HUNTSVILLEState  
ALZip Code  
35801-1150FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CLINICAL PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660518**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RINN, ROGER, C., DR.,**

Mailing Address 1817 INSPIRATION LN SE

City  
HUNTSVILLEState  
ALZip Code  
35801-1150FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CLINICAL PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660523**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1568 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, DALE, , ,**

Mailing Address 104 BRANNON LANE

City  
TROYState  
ALZip Code  
36079-8203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.71

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27660532

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODRIQUEZ, MICHAEL, G., ,**

Mailing Address P.O. BOX 3765

City  
SHOW LOWState  
AZZip Code  
85902-3765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658970

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROE, JOAN, , MRS.,**

Mailing Address 360 W NOKOMIS CT

City  
FOX POINTState  
WIZip Code  
53217-2611FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

632.24

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658634

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

114.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1569 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROSACKER, VIRGINIA, , ,**

Mailing Address 1036 SW 110TH TER

City  
OKLAHOMA CITYState  
OKZip Code  
73170-7035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659357**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658337**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659346**

Amount of Each Receipt this Period

2.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

39.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1570 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659366

Amount of Each Receipt this Period

1.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660453

Amount of Each Receipt this Period

1.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660591

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1571 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27661140

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUFFER, JUDY, M., ,**

Mailing Address 380 ROBIN LN

City  
TITUSState  
ALZip Code  
36080-2818FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27661060

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

580.55

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658693

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

48.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1572 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660167

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVERState  
NJZip Code  
08882-1908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658664

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVERState  
NJZip Code  
08882-1908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659144

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.95



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1573 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUSSELL, JONI, , ,**

Mailing Address 5210 REBEL ROAD

City  
MARIETTAState  
GAZip Code  
30068-4720FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.35

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659240**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUTTER, JOSEPH, G., MR., USAF RET**

Mailing Address 2250 GOVERNORS BEND RD SE

City  
HUNTSVILLEState  
ALZip Code  
35801-1371FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658564**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANCHEZ, THOMAS, , ,**

Mailing Address 12140 BEATY AVE

City  
NORWALKState  
CAZip Code  
90650-1923FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

345.91

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660725**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

147.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1574 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHIELDS, GARY, , ,**

Mailing Address 603 MAIN ST

City  
GOODLANDState  
KSZip Code  
67735-1843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.70

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659686**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHILDKNECHT, RAINER, F., MR.,**

Mailing Address 211 WOODLAWN AVE

City  
WINNETKAState  
ILZip Code  
60093-1552FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.20

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660335**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.80

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658772**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

147.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1575 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660641**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHOENHALS, RICHARD, , ,**

Mailing Address P.O. BOX 2075

City  
WEATHERFORDState  
OKZip Code  
73096-8075FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROSSPOINTE CHURCHOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.35

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659387**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHOENHALS, RICHARD, , ,**

Mailing Address P.O. BOX 2075

City  
WEATHERFORDState  
OKZip Code  
73096-8075FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROSSPOINTE CHURCHOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

715.35

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659394**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

68.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1576 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHOENHALS, RICHARD, , ,**

Mailing Address P.O. BOX 2075

City  
WEATHERFORDState  
OKZip Code  
73096-8075FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROSSPOINTE CHURCHOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659398**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHOENHALS, RICHARD, , ,**

Mailing Address P.O. BOX 2075

City  
WEATHERFORDState  
OKZip Code  
73096-8075FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROSSPOINTE CHURCHOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659400**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHOENHALS, RICHARD, , ,**

Mailing Address P.O. BOX 2075

City  
WEATHERFORDState  
OKZip Code  
73096-8075FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROSSPOINTE CHURCHOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

715.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659403**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1577 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHOENHALS, RICHARD, , ,**

Mailing Address P.O. BOX 2075

City  
WEATHERFORDState  
OKZip Code  
73096-8075FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CROSSPOINTE CHURCHOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659411

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHOENHALS, RICHARD, , ,**

Mailing Address P.O. BOX 2075

City  
WEATHERFORDState  
OKZip Code  
73096-8075FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CROSSPOINTE CHURCHOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659413

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHOENHALS, RICHARD, , ,**

Mailing Address P.O. BOX 2075

City  
WEATHERFORDState  
OKZip Code  
73096-8075FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CROSSPOINTE CHURCHOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

715.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659421

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1578 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHUMAN, JAMES, , ,**

Mailing Address 106 POGUE AVE

City  
EASTLANDState  
TXZip Code  
76448-3005FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
J & J AIR CONDITIONINGOccupation (for Individual)  
A/C SALES & SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.50

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660976**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHWARTZ, JAMES, F., MR.,**

Mailing Address 60455 DESERT SHADOW DRIVE

City  
LA QUINTAState  
CAZip Code  
92253-7726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.98

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660630**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658863**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1579 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCOTT, AUDREY, , ,

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658866

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCOTT, AUDREY, , ,

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658867

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCOTT, AUDREY, , ,

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658869

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1580 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658873

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658878

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEGRAVES, GILDA, G., ,**

Mailing Address 14236 S SWAN RD

City  
GULFPORTState  
MSZip Code  
39503-9073FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

661.26

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658502

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

40.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1581 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SELIG, ROBERT, J., ,**

Mailing Address 65 JOLLEY DR APT 331

City  
BLOOMFIELDState  
CTZip Code  
06002-4251FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.32

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659693**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SELIG, ROBERT, J., ,**

Mailing Address 65 JOLLEY DR APT 331

City  
BLOOMFIELDState  
CTZip Code  
06002-4251FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.32

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661080**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHAUGHNESSY, KATHLEEN, , ,**

Mailing Address 182 BURNT HICKORY WAY

City  
FORTSONState  
GAZip Code  
31808-4468FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

508.87

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659396**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1582 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHAUGHNESSY, KATHLEEN, , ,**

Mailing Address 182 BURNT HICKORY WAY

City  
FORTSONState  
GAZip Code  
31808-4468FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.87

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659397

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHAUGHNESSY, KATHLEEN, , ,**

Mailing Address 182 BURNT HICKORY WAY

City  
FORTSONState  
GAZip Code  
31808-4468FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.87

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659439

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHAUGHNESSY, KATHLEEN, , ,**

Mailing Address 182 BURNT HICKORY WAY

City  
FORTSONState  
GAZip Code  
31808-4468FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

508.87

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659441

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1583 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHAUGHNESSY, KATHLEEN, , ,**

Mailing Address 182 BURNT HICKORY WAY

City  
FORTSONState  
GAZip Code  
31808-4468FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.87

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659455**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHAUGHNESSY, KATHLEEN, , ,**

Mailing Address 182 BURNT HICKORY WAY

City  
FORTSONState  
GAZip Code  
31808-4468FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.87

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659458**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHEDLOCK, JOHN, , ,**

Mailing Address 10089 IRON MOUNTAIN CT

City  
RANCHO CUCAMONGAState  
CAZip Code  
91737-6831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.50

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658595**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1584 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659426**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660230**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660598**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

39.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1585 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHIVELY, KENNETH, , ,**

Mailing Address PO BOX 25333

City  
TUCSONState  
AZZip Code  
85734-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659152

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SINCLAIR, PATRICIA, N., MRS.,**

Mailing Address 1739 N TULARE WAY

City  
UPLANDState  
CAZip Code  
91784-1961FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659483

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SINCLAIR, PATRICIA, N., MRS.,**

Mailing Address 1739 N TULARE WAY

City  
UPLANDState  
CAZip Code  
91784-1961FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660094

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1586 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIWIK, DEBORAH, , ,**

Mailing Address 1750 5TH STREET DR. NW

City  
HICKORYState  
NCZip Code  
28601-5206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.49

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660012**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMALLWOOD, MARJORIE, , MS.,**

Mailing Address 2315 ATTALA ROAD 3121

City  
VAIDENState  
MSZip Code  
39176-9549FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.09

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658752**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, CHRIS, , ,**

Mailing Address 2082 WILLOW BEACH

City  
KEEGO HARBORState  
MIZip Code  
48320-1210FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.09

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659177**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1587 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, CYNTHIA, , ,**

Mailing Address 38793 SW FERNWOOD DR.

City  
GASTONState  
ORZip Code  
97119-8584FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660438**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, DANIEL, G., MR.,**Mailing Address 7 WOODBINE RD  
APT 100City  
FLORHAM PARKState  
NJZip Code  
07932-2649FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.01

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661018**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, DAVID, , ,**

Mailing Address 7709 19TH STREET CT W

City  
TACOMAState  
WAZip Code  
98466-3620FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
J AND J UNIONOccupation (for Individual)  
FIELD SERVICE ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660205**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

248.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1588 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, KELLY, , ,**

Mailing Address 5800 GRASSMERE LANE

City  
DALLASState  
TXZip Code  
75205-4624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659124

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, KELLY, , ,**

Mailing Address 5800 GRASSMERE LANE

City  
DALLASState  
TXZip Code  
75205-4624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659770

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, KELLY, , ,**

Mailing Address 5800 GRASSMERE LANE

City  
DALLASState  
TXZip Code  
75205-4624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660485

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

145.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1589 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, LINDA, NESTOR, ,**Mailing Address 700 PENN CENTER BLVD APT 403  
LAUREL VILLAGE APTSCity  
PITTSBURGHState  
PAZip Code  
15235-5916FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658511**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City

BROADVIEW HEIGHTS

State

OH

Zip Code

44147-1035

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660245**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City

BROADVIEW HEIGHTS

State

OH

Zip Code

44147-1035

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661397**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.84

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1590 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNYDER, ROBERT, A., MR.,**Mailing Address 5 OLD POST RD 3  
LOT 14City  
MILLERTONState  
NYZip Code  
12546-4969FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BOOK SELLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659604**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLEANICOV, PAVEL, A., MR.,**

Mailing Address 711 MEADOW CREST DRIVE

City  
ROCKTONState  
ILZip Code  
61072-8000FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659352**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLEANICOV, PAVEL, A., MR.,**

Mailing Address 711 MEADOW CREST DRIVE

City  
ROCKTONState  
ILZip Code  
61072-8000FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659761**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1591 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPEIGHT, CAROL, E., ,**

Mailing Address 1421 HWY 641 SOUTH

City  
PARISState  
TNZip Code  
38242-6750FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659284

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPONHOLZ, RICHARD, , ,**

Mailing Address 358 FRANKLIN ST

City  
SAN MATEOState  
CAZip Code  
94402-2214FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660979

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEES, LAURA, , ,**

Mailing Address 3509 HOUCKS MILL RD.

City  
MONKTONState  
MDZip Code  
21111-1703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

496.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660593

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

109.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1592 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEIN, BERTRAM, , ,**

Mailing Address 6797 MANCHESTER RD.

City  
SOUTH BELOITState  
ILZip Code  
61080-9773FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.50

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660551**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEIN, HARRIS, , ,**

Mailing Address 2 TODD COURT

City  
HUNTINGTON STATIONState  
NYZip Code  
11746-4224FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.63

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661421**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEINBERG, JACLYN, , ,**

Mailing Address 16499 SENTERRA DR

City  
DELRAY BEACHState  
FLZip Code  
33484-6955FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

264.50

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659820**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1593 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEWART, JOHN, , ,**

Mailing Address 8612 JONES MILL RD

City  
CHEVY CHASEState  
MDZip Code  
20815-4819FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JONES GROUPOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661271**

Amount of Each Receipt this Period

53.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STILLWELL, KAREN, , ,**

Mailing Address 59501 414TH LANE

City  
NEW ULMState  
MNZip Code  
56073-4220FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.13

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658678**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STONE, RODNEY, , ,**

Mailing Address 8530 VENICE BOULEVARD

City  
LOS ANGELESState  
CAZip Code  
90034-2549FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENVOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660482**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

157.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1594 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STOSSER, JEANNE, , ,**

Mailing Address P.O. BOX 10397

City  
BLACKSBURGState  
VAZip Code  
24062-0397FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658722**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOUT, GREGORY, , ,**

Mailing Address 1747 TOMMY AARON DR

City  
EL PASOState  
TXZip Code  
79936-4621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659965**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRECKER, GARY, , ,**

Mailing Address 8007 WHITE OAK AVE

City  
RESEDAState  
CAZip Code  
91335-1534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

536.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659039**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

169.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1595 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STUDINKA, JOYCE, , ,**

Mailing Address 145 WOODMONT DR

City  
BIRMINGHAMState  
ALZip Code  
35209-6627FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27661022

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659237

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659984

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1596 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUNDERLIN, REBECCA, , ,**

Mailing Address 617 GROVE ST.

City  
ULYSSESState  
PAZip Code  
16948-9463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.35

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659831**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SURPRENANT, LINDA, , ,**

Mailing Address 1016 FREEDOM LANE

City  
AUBREYState  
TXZip Code  
76227-2107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658941**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SWANSON, CELISE, , ,**

Mailing Address 1001 KELLAND DRIVE

City  
NORFOLKState  
NEZip Code  
68701-9217FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SACRED HEARTOccupation (for Individual)  
COACH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.50

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661441**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

306.69



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1597 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SYLVESTRI, RONALD, J., MR.,**

Mailing Address 333 WEST STREET # 5

City  
DARIENState  
CTZip Code  
06820-4038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.65

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660642**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, TOM, , MR.,**

Mailing Address 34835 SE LUSTED RD

City  
GRESHAMState  
ORZip Code  
97080-8950FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TAYLOR BOILEROccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.33

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659309**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, TOM, , MR.,**

Mailing Address 34835 SE LUSTED RD

City  
GRESHAMState  
ORZip Code  
97080-8950FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TAYLOR BOILEROccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.33

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659311**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1598 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, TOM, , MR.,**

Mailing Address 34835 SE LUSTED RD

City  
GRESHAMState  
ORZip Code  
97080-8950FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TAYLOR BOILEROccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.33

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659315**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TECMIRE, EUNICE, M., ,**

Mailing Address 888 TWIN CREEKS CROSSING 308

City  
CENTRAL POINTState  
ORZip Code  
97502-5507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.97

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659076**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TECMIRE, EUNICE, M., ,**

Mailing Address 888 TWIN CREEKS CROSSING 308

City  
CENTRAL POINTState  
ORZip Code  
97502-5507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

447.97

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659081**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1599 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TECMIRE, EUNICE, M., ,**

Mailing Address 888 TWIN CREEKS CROSSING 308

City  
CENTRAL POINTState  
ORZip Code  
97502-5507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659085

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TECMIRE, EUNICE, M., ,**

Mailing Address 888 TWIN CREEKS CROSSING 308

City  
CENTRAL POINTState  
ORZip Code  
97502-5507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659086

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TECMIRE, EUNICE, M., ,**

Mailing Address 888 TWIN CREEKS CROSSING 308

City  
CENTRAL POINTState  
ORZip Code  
97502-5507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

447.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659090

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1600 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THATCHER, PATRICIA, , ,**

Mailing Address 318 ROSEMARY ST

City  
SMYRNAState  
TNZip Code  
37167-5257FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.34

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659281**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANEState  
UTZip Code  
84737-1405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.62

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660125**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANEState  
UTZip Code  
84737-1405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

815.62

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660742**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1601 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANEState  
UTZip Code  
84737-1405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.62

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660745**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANEState  
UTZip Code  
84737-1405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.62

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660751**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TONNESEN, ALAN, , ,**

Mailing Address 38 CONKLIN ROAD

City  
WARWICKState  
NYZip Code  
10990-3911FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PASSPORT CORPORATIONOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

342.50

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661077**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1602 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRYON, WARREN, W., MR.,**Mailing Address 225 12TH ST NE  
APT 2City  
WASHINGTONState  
DCZip Code  
20002-6315FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CAPITOL COUNSELOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660560**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TULLAI, SARAH, L., MRS.,**

Mailing Address 14900 W GOLDWATER RIDGE DR.

City  
SURPRISEState  
AZZip Code  
85374-9551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.85

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661444**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. URREIZTIETA, IREL, , ,**

Mailing Address 180 KODIAK ST

City  
MORRO BAYState  
CAZip Code  
93442-3016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

477.55

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658383**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

311.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1603 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VALLEY, NANCY, , ,**

Mailing Address 3 INDIAN PIPE DRIVE

City  
WYNANTSKILLState  
NYZip Code  
12198-7818FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.30

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658654**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VASEK, GARY, R., MR.,**

Mailing Address 6387 ASHCROFT DR.

City  
COLORADO SPRINGSState  
COZip Code  
80918-3241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.85

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661396**

Amount of Each Receipt this Period

18.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VER STEEG, LARRY, , ,**

Mailing Address 410 2ND STREET

City  
ORANGE CITYState  
IAZip Code  
51041-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.08

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659174**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

165.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1604 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VERPLANCK, JAMES, S., MR.,**

Mailing Address 3525 BRIDGEFIELD DR.

City  
LAKELANDState  
FLZip Code  
33803-5912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660215**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VERPLANCK, JAMES, S., MR.,**

Mailing Address 3525 BRIDGEFIELD DR.

City  
LAKELANDState  
FLZip Code  
33803-5912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660266**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VIDAL, MILLIE, , ,**

Mailing Address 280 ACACIA AVE

City  
SAN BRUNOState  
CAZip Code  
94066-4845FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659001**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1605 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VILLABONA, MARTHA, , ,**

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMIState  
FLZip Code  
33143-8048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659735**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VITALI, THEODORE, , ,**

Mailing Address 9802 WINTER NIGHT LANE

City

SAINT LOUIS

State

MO

Zip Code

63126-3246

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ST. LOUIS UNIVERSITYOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.90

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661146**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City

SAN JOSE

State

CA

Zip Code

95116-3254

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660558**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1606 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661162**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661230**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VON ROHR, PHILIP, , ,**

Mailing Address 109 21ST STREET

City  
BELLEAIR BEACHState  
FLZip Code  
33786-3406FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

633.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27658597**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1607 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VON ROHR, PHILIP, , ,**

Mailing Address 109 21ST STREET

City  
BELLEAIR BEACHState  
FLZip Code  
33786-3406FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.90

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658598**

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VON ROHR, PHILIP, , ,**

Mailing Address 109 21ST STREET

City  
BELLEAIR BEACHState  
FLZip Code  
33786-3406FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.90

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658599**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VON ROHR, PHILIP, , ,**

Mailing Address 109 21ST STREET

City  
BELLEAIR BEACHState  
FLZip Code  
33786-3406FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

633.90

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658603**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

348.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1608 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VOWELL, BELITA, J., MRS.,**

Mailing Address 508 GRASSMEADE COVE

City  
CORDOVAState  
TNZip Code  
38018-7670FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660724

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VOWELL, BELITA, J., MRS.,**

Mailing Address 508 GRASSMEADE COVE

City  
CORDOVAState  
TNZip Code  
38018-7670FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660782

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VOWELL, BELITA, J., MRS.,**

Mailing Address 508 GRASSMEADE COVE

City  
CORDOVAState  
TNZip Code  
38018-7670FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

335.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660826

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

72.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1609 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WADDELL, JENETTA, , ,**

Mailing Address PO BOX 215

City  
TUSCUMBIAState  
ALZip Code  
35674-0215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BLUE MOUNTAIN CHRISTIAN UNIVERSITYOccupation (for Individual)  
DEAN, SCHOOL OF EDUCATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

643.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659034**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WAINSCOTT, AARON, , ,**

Mailing Address 2800 CHAD CT

City  
SACRAMENTOState  
CAZip Code  
95827-1310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HPSOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660309**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALLACE, DEBRA, , ,**

Mailing Address P.O. BOX 197

City  
MIDLANDState  
TXZip Code  
79702-0197FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660259**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1610 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WANDEL, JOAN, C., MS.,**

Mailing Address 249 CARAVAN CIR

City  
NORTH FORT MYERSState  
FLZip Code  
33903-7321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STATE OF MISSOURIOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.16

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659032**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATKINS, MARK, A., MR.,**

Mailing Address 304 EAST LAKE GENEVA ROAD NE

City  
ALEXANDRIAState  
MNZip Code  
56308-8906FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GENEVA CAPITAL LLCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658659**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRISTOL MYERS SQUIBBOccupation (for Individual)  
COMPETITIVE INTELLIGENCE STRAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.41

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660541**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

179.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1611 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, PAMELA, , ,**

Mailing Address 4684 N QUAIL LAKE DR.

City  
CLOVISState  
CAZip Code  
93619-4645FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MERCHANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.68

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27661462

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEATHERLY, CINDI, , ,**

Mailing Address 4690 MEADOW SPRINGS DRIVE

City

WATKINSVILLE

State

GA

Zip Code

30677-4642

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.16

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27658539

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEIGAND, CRAIG, , MR.,**

Mailing Address 2289 S ISABELL ST

City

LAKEWOOD

State

CO

Zip Code

80228-6460

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.43

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659784

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

96.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1612 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELCH, GARY, , ,**

Mailing Address 3349 AN COUNTY RD 463

City  
MONTALBAState  
TXZip Code  
75853-2933FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.60

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661456**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WELSH, THERESA, , ,**

Mailing Address 2015 OLD BALSAM RD

City  
WAYNESVILLEState  
NCZip Code  
28786-8036FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.50

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660857**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658615**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.75



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1613 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658728**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHEELER, STEVEN, R., MR.,**

Mailing Address 21631 E 101ST ST S

City  
BROKEN ARROWState  
OKZip Code  
74014-3645FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.87

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27660991**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITESIDE, STEVEN, , ,**

Mailing Address 147 SENECA DRIVE

City  
CLARKSBURGState  
WVZip Code  
26301-4352FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661199**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1614 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WIGGINS, JONATHAN, P., MR.,**

Mailing Address 1522 S 18TH ST APT2

City  
LAFAYETTEState  
INZip Code  
47905-2071FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PURDUE UNIVERSITYOccupation (for Individual)  
ELECTRONICS TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.99

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659533

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WIGGINS, JONATHAN, P., MR.,**

Mailing Address 1522 S 18TH ST APT2

City  
LAFAYETTEState  
INZip Code  
47905-2071FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PURDUE UNIVERSITYOccupation (for Individual)  
ELECTRONICS TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.99

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659536

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIGGINS, JONATHAN, P., MR.,**

Mailing Address 1522 S 18TH ST APT2

City  
LAFAYETTEState  
INZip Code  
47905-2071FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PURDUE UNIVERSITYOccupation (for Individual)  
ELECTRONICS TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.99

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659538

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

54.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1615 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WIGGINS, JONATHAN, P., MR.,**

Mailing Address 1522 S 18TH ST APT2

City  
LAFAYETTEState  
INZip Code  
47905-2071FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PURDUE UNIVERSITYOccupation (for Individual)  
ELECTRONICS TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659539

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WIGGINS, JONATHAN, P., MR.,**

Mailing Address 1522 S 18TH ST APT2

City  
LAFAYETTEState  
INZip Code  
47905-2071FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PURDUE UNIVERSITYOccupation (for Individual)  
ELECTRONICS TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659545

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIGGINS, JONATHAN, P., MR.,**

Mailing Address 1522 S 18TH ST APT2

City  
LAFAYETTEState  
INZip Code  
47905-2071FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PURDUE UNIVERSITYOccupation (for Individual)  
ELECTRONICS TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659548

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.89

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1616 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WIGGINS, JONATHAN, P., MR.,**

Mailing Address 1522 S 18TH ST APT2

City  
LAFAYETTEState  
INZip Code  
47905-2071FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PURDUE UNIVERSITYOccupation (for Individual)  
ELECTRONICS TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.99

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659551**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILHELM, JOSEPH, L., MR.,**

Mailing Address 884 PEBBLEBROOK LANE

City  
EAST LANSINGState  
MIZip Code  
48823-2164FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661369**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMSON, GARY, , ,**

Mailing Address 817 WEST FRONT STREET

City  
SEALYState  
TXZip Code  
77474-3422FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

417.50

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659564**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

187.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1617 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, JANET, , ,**

Mailing Address 214 GLENBURNIE DR

City  
NEW BERNState  
NCZip Code  
28560-2848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27661032**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, JEAN, , ,**

Mailing Address 5644 ARAL DRIVE

City  
LAKELANDState  
FLZip Code  
33805-9615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27659014**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, JEAN, , ,**

Mailing Address 5644 ARAL DRIVE

City  
LAKELANDState  
FLZip Code  
33805-9615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11A.27660785**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1618 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, PHILLIP, , ,**

Mailing Address 7866 TUMBLEWEED TRL

City  
SPRINGFIELDState  
ILZip Code  
62707-4582FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

PHILLIP B WILSON

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

270.70

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661287**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, STEVE, , ,**

Mailing Address 1305 233RD ST SE

City  
BOTHELLState  
WAZip Code  
98021-5804FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

428.64

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658398**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINTERS, KENNETH, C., MR.,**

Mailing Address 29840 THUNDERPAW DR

City  
HARVESTState  
ALZip Code  
35749-6523FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Aggregate Year-to-Date ▼

376.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661036**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1619 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659763

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659776

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659781

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.17

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1620 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27659790

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOOSLEY, MARGARET, , ,**

Mailing Address 4320 PRIVATE ROAD 7201

City  
WEST PLAINSState  
MOZip Code  
65775-5884FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27661453

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, CAROLYN, , ,**

Mailing Address 30 LISA AVE

City  
POPLAR BLUFFState  
MOZip Code  
63901-9094FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27661090

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

123.49



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1621 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, CAROLYN, , ,**

Mailing Address 30 LISA AVE

City  
POPLAR BLUFFState  
MOZip Code  
63901-9094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27661115**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, MARY, H., MR.,**

Mailing Address 300 BELL MEADE DR.

City  
EADSState  
TNZip Code  
38028-3524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.92

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27659519**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA11A.27658747**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1622 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27659599

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27660697

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025

Transaction ID : SA11A.27660763

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

191.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1623 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27661006

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27661053

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YSURSA, GENEVIEVE, , ,**

Mailing Address 3628 E. WARM SORINGS

City  
BOISEState  
IDZip Code  
83716-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BISHOP KELLY HIGHOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27658352

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

128.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1624 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZAPERACH, TERRY, , ,**

Mailing Address 746 LANTANA ST.

City  
COCOAState  
FLZip Code  
32926-5246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.27660774

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11C.27661477

Amount of Each Receipt this Period

95107.71

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661829

Amount of Each Receipt this Period

1.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

101.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1625 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.32

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27661884

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.32

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27661997

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AHN, ROGER, , ,**

Mailing Address 2807 NORTH 160 STREET

City  
OMAHAState  
NEZip Code  
68116-2061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

373.90

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663377

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

17.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1626 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALBRECHT, MICHELLE, , ,**

Mailing Address 1593 N 820 E

City  
SHELLEYState  
IDZip Code  
83274-5197FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662272**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALFAISAL, FAHD, , ,**

Mailing Address 9424 CHEROKEE

City  
BEVERLY HILLSState  
CAZip Code  
90210-1704FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

688.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663571**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALKIRE, MAUNIE LOU, , ,**

Mailing Address 6 SUMMIT DRIVE

City  
KIMBERLING CITYState  
MOZip Code  
65686-9418FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

341.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662614**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

215.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1627 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALYN, IRENE, B., ,**

Mailing Address 419 TOWN ROAD

City  
DAYTONState  
PAZip Code  
16222-5513FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663484

Amount of Each Receipt this Period

21.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662426

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663319

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1628 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664356

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CYNNIE, , ,**

Mailing Address 55 RODEO AVENUE # 5

City  
SAUSALITOState  
CAZip Code  
94965-1738FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661596

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662701

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.41



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1629 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CYNNIE, , ,**

Mailing Address 55 RODEO AVENUE # 5

City  
SAUSALITOState  
CAZip Code  
94965-1738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.62

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664513**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, JULIA, , ,**

Mailing Address 863 FOLEY ROAD

City  
HARRISONState  
ARZip Code  
72601-7950FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CJSOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661715**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.54

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662209**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1630 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.54

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662216**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDRETTI, MARIO, , MR.,**

Mailing Address 457 ROSE INN AVE

City  
NAZARETHState  
PAZip Code  
18064-9234FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PROFESSIONAL RACE CAR DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.55

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661663**

Amount of Each Receipt this Period

80.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AQUAVELLA, JAMES, , DR.,**

Mailing Address 10 HEARTHSTONE RD

City  
PITTSFORDState  
NYZip Code  
14534-1118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UNIVERSITY OF ROCHESTEROccupation (for Individual)  
OPHTHALMOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

482.30

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663275**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1631 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARNOLD, FLORENCE, M., MS.,**

Mailing Address 231 N MANNING ST

City  
HILLSDALEState  
MIZip Code  
49242-1216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.82

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27661630

Amount of Each Receipt this Period

37.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ASH, SUSAN, , MRS.,**

Mailing Address 1351 KINGSBORO CT

City  
WESTLAKE VILLAGEState  
CAZip Code  
91362-4334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663698

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BACHELDOR, NED, , ,**Mailing Address 630 CAROLINA BAY DR  
APT 209City  
WILMINGTONState  
NCZip Code  
28403-2038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.45

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663854

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

152.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1632 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BACHOVCHIN, WILLIAM, , ,**

Mailing Address 136 HARRISON AVENUE

City  
BOSTONState  
MAZip Code  
02111-1817FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TUFTS UNIVERSITYOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664017**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAILEY, ANN, , ,**

Mailing Address 104 CLUB PLACE CT

City  
WARNER ROBINSState  
GAZip Code  
31088-7551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.75

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662927**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAILEY, ANN, , ,**

Mailing Address 104 CLUB PLACE CT

City  
WARNER ROBINSState  
GAZip Code  
31088-7551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

733.75

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663673**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1633 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAILEY, ANN, , ,**

Mailing Address 104 CLUB PLACE CT

City  
WARNER ROBINSState  
GAZip Code  
31088-7551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.75

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663689**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAIRD, CLIFFORD, , ,**

Mailing Address 1750 NEWTON ROAD

City  
FERRISState  
TXZip Code  
75125-9464FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MODERN SYSTEMS INCOccupation (for Individual)  
PRO MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.24

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662525**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BALLARD, NANCY, E., MRS.,**

Mailing Address 2110 AUSTIN CT

City  
RICHLANDState  
WAZip Code  
99354-2750FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

343.53

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662829**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.04

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1634 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BALLARD, NANCY, E., MRS.,

Mailing Address 2110 AUSTIN CT

City  
RICHLANDState  
WAZip Code  
99354-2750FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663078

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BAMERT, TOM, , ,

Mailing Address BOX 336

City  
IONEState  
CAZip Code  
95640-0336FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1402.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662279

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BANCROFT, HUGH, , MR., III

Mailing Address P.O. BOX 25

City  
RANCHO SANTA FEState  
CAZip Code  
92067-0025FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1026.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663848

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

388.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1635 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARILLARO, MARYANN, , MS.,**Mailing Address 130 WATER ST  
APT 1ACity  
NEW YORKState  
NYZip Code  
10005-1622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662600**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAUGHMAN, JO ANN, , MS.,**

Mailing Address P.O. BOX 1269

City  
PHILOMATHState  
ORZip Code  
97370-1269FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662675**

Amount of Each Receipt this Period

48.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BECK, ARNOLD, A., MR.,**

Mailing Address 300 FREDRICKSBURG CT. NE

City  
NORTH CANTONState  
OHZip Code  
44720-2575FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

437.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662077**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1636 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BELL, ELIZABETH, A., MS.,**

Mailing Address 2421 AMARILLO DR

City  
O FALLONState  
MOZip Code  
63368-3575FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IPCOccupation (for Individual)  
MEDICAL ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.51

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663448**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BELLAH, ERIN, , ,**

Mailing Address 8 BILTMORE ESTATE

City  
PHOENIXState  
AZZip Code  
85016-2810FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.64

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662512**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERMAN, SANDRA, , ,**

Mailing Address 80 OLYMPIA CHASE DRIVE

City  
LAS VEGASState  
NVZip Code  
89141-6039FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664450**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.88



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1637 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERTOLUCCI, LAWRENCE, E., MR.,**

Mailing Address 272 SAVANNAH DR.

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-7903FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662992**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERTOLUCCI, LAWRENCE, E., MR.,**

Mailing Address 272 SAVANNAH DR.

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-7903FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664297**

Amount of Each Receipt this Period

22.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BESINGER, RICHARD, , ,**

Mailing Address 3700 SARATOGA AVENUE

City  
DOWNERS GROVEState  
ILZip Code  
60515-1443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOYOLA UNIVERSITY HEALTH SYSTEOccupation (for Individual)  
ACADEMIC PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662219**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

142.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1638 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662352

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BHATTI, M, ARSHAD, ,**

Mailing Address 2200 TREMONT ST. APT. 205

City  
PHILADELPHIAState  
PAZip Code  
19115-5022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662780

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BHATTI, M, ARSHAD, ,**

Mailing Address 2200 TREMONT ST. APT. 205

City  
PHILADELPHIAState  
PAZip Code  
19115-5022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

355.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663251

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1639 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BINGHAM, GLENN, S., MR.,

Mailing Address 721 STEWARTS RD

City  
LANEXAState  
VAZip Code  
23089-8804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

Transaction ID : SA11A.27662396

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BINIENDA, MARY, E., MS.,

Mailing Address 28413 ABBEY LN  
APT 172City  
NEW HUDSONState  
MIZip Code  
48165-2804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

Transaction ID : SA11A.27664364

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BISHOP, GLORIA, , ,

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGOState  
ORZip Code  
97034-7595FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.23

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

Transaction ID : SA11A.27662460

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

47.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1640 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27662740

Amount of Each Receipt this Period

18.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27664259

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27664261

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1641 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664262**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLACK, LARRY, , ,**

Mailing Address 259 WHITE HERON DR.

City  
GEORGETOWNState  
TXZip Code  
78628-7272FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664232**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLACK, ROBERT, B., MR.,**

Mailing Address 65 SOUTH BATTERY

City  
CHARLESTONState  
SCZip Code  
29401-2325FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1308.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664202**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1642 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLANKENSHIP, KATHY, , ,**

Mailing Address 125 ORCHARD DR.

City  
ELIDAState  
OHZip Code  
45807-1084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.11

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662235**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLANKENSHIP, KATHY, , ,**

Mailing Address 125 ORCHARD DR.

City  
ELIDAState  
OHZip Code  
45807-1084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.11

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663696**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLANTON, JENNIFER, , ,**

Mailing Address 1989 NESMITH ROAD

City  
NESMITHState  
SCZip Code  
29580-3336FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SANTEE COOPEROccupation (for Individual)  
SR. INVENTORY SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.98

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662762**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

215.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1643 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLYE, MARJORIE, A., ,**

Mailing Address 60 AVALON WAY

City  
SHARPSBURGState  
GAZip Code  
30277-2093FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.41

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27661704

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNEState  
ALZip Code  
35967-5145FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.05

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663126

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNEState  
ALZip Code  
35967-5145FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

343.05

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663293

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1644 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOBZIEN, ANN, , ,**

Mailing Address 52 RAVEN DRIVE

City  
ROCKY POINTState  
NCZip Code  
28457-9440FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661881**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662353**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOSTIC, JAMI, , ,**

Mailing Address 137 FOLGER STREET

City  
CLEMSONState  
SCZip Code  
29631-1368FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

309.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663273**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.50



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1645 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMAS

State  
OR

Zip Code  
97015-8629

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

**02** / **08** / **2025**

**Transaction ID : SA11A.27661889**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYKIN, LYNNE, , ,**

Mailing Address 3394 KENNEDY AVENUE

City  
THE VILLAGES

State  
FL

Zip Code  
32163-6345

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

**02** / **08** / **2025**

**Transaction ID : SA11A.27663807**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYLE, WILLIAM, , ,**

Mailing Address 4807 FAIRFORD DR.

City  
SAN ANTONIO

State  
TX

Zip Code  
78228-1013

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
MILITARY MINISTRY OF CRU

Occupation (for Individual)  
FIELD MISSIONARY STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

332.14

Date of Receipt

**02** / **08** / **2025**

**Transaction ID : SA11A.27663064**

Amount of Each Receipt this Period

20.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

74.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1646 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRACKEN, KAY, , ,**

Mailing Address 405 HAMVASY

City  
TYLERState  
TXZip Code  
75701-5324FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRACKEN INTERESTOccupation (for Individual)  
OIL AND GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2334.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662508

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRENNAN, BERNARD, , ,**

Mailing Address P.O. BOX 1639

City

PONTE VEDRA BEACH

State

FL

Zip Code

32004-1639

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663573

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRENNAN, BERNARD, , ,**

Mailing Address P.O. BOX 1639

City

PONTE VEDRA BEACH

State

FL

Zip Code

32004-1639

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663582

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

113.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1647 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROPHY, JAMES, , ,**

Mailing Address 929 WEST KALER DRIVE

City  
PHOENIXState  
AZZip Code  
85021-8028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RYLEY CARLOCKOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.40

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663619

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, AUGUSTA, , ,**

Mailing Address P.O. BOX 345

City  
DARRINGTONState  
WAZip Code  
98241-0345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.37

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27662210

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, AUGUSTA, , ,**

Mailing Address P.O. BOX 345

City  
DARRINGTONState  
WAZip Code  
98241-0345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.37

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27662212

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1648 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, PATRICK, , ,**

Mailing Address 17077 PAWNEE XING

City  
COLLEGE STATIONState  
TXZip Code  
77845-6351FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CONSTELLISOccupation (for Individual)  
SECURITY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664344**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, THOMAS, L., MR.,**

Mailing Address 1971 ROSE PT

City  
ATHENSState  
TXZip Code  
75752-8021FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662517**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITYState  
NJZip Code  
08226-2367FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

553.96

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662086**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1649 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUDRAS, JOSEPH, , MR.,**

Mailing Address 3432 PUTNAM ST

City  
FALLS CHURCHState  
VAZip Code  
22042-3727FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662698

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUNN, KAY, , ,**

Mailing Address 1908 GAINESWOOD DR

City  
TUSCALOOSAState  
ALZip Code  
35406-3558FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661624

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUNTYN, ZELLA, D., MS.,**

Mailing Address 3746 HWY 43 N.

City  
BRANDONState  
MSZip Code  
39047-8253FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662737

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

112.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1650 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURCHER, PAT, , ,**

Mailing Address 3700 LAKE POWHATAN

City  
WILLIAMSBURGState  
VAZip Code  
23188-8035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.24

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662847**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURDICK, CHARLES, , ,**

Mailing Address 2826 LEMAR STREET

City  
SILVER SPRINGState  
MDZip Code  
20904-1836FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ITA INTERNATIONAL LLCOccupation (for Individual)  
ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664528**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURKE, MARILYN, RISNER, MS.,**

Mailing Address 313 E MAIN ST

City  
DAVISState  
OKZip Code  
73030-1905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE AND REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662253**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1651 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURKE, MARILYN, RISNER, MS.,**

Mailing Address 313 E MAIN ST

City  
DAVISState  
OKZip Code  
73030-1905FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

INSURANCE AND REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663893**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURLAND, ALICE, , ,**

Mailing Address 4214 WATERBECK ST

City

FULSHEAR

State

TX

Zip Code

77441-3904

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661744**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURNEY, THOMAS, R., MR.,**

Mailing Address 5162 BELMEZ

City

LAGUNA WOODS

State

CA

Zip Code

92637-1810

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

283.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663414**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1652 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAFFREY, PETER, , ,**

Mailing Address 4 BRIARCLIFF ROAD

City  
MORRIS PLAINSState  
NJZip Code  
07950-2907FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.87

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661662

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CALASCIONE, PATRICIA, A., MRS.,**

Mailing Address 46 BAY 20 STREET

City  
BROOKLYNState  
NYZip Code  
11214-3802FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY PRO GROUP, INCOccupation (for Individual)  
EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661824

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661649

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.94



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1653 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662249**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CANNON, MARGARET, , ,**

Mailing Address 3211 BARONESS CT

City  
PLANT CITYState  
FLZip Code  
33565-5603FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663117**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNELLO, MARILYN, D., ,**

Mailing Address 38 WARD STREET

City  
RANDOLPHState  
MAZip Code  
02368-4625FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BROCKTON VISITING NURSE ASSOCIATIONOccupation (for Individual)  
CNA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

431.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662682**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1654 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

**Transaction ID : SA11A.27661607**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

**Transaction ID : SA11A.27662110**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

**Transaction ID : SA11A.27663584**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

42.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1655 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664260**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664500**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664531**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1656 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664540**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARTER, CHRISTINE, , ,**

Mailing Address 1199 OVERLOOK DR.

City  
SIERRA VISTAState  
AZZip Code  
85635-5511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.26

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663229**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAST, BONNIE, , ,**

Mailing Address 308 PINE MOSS DR.

City  
FORT WALTON BEACHState  
FLZip Code  
32548-6308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.04

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663512**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

26.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1657 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CASTRICHINI, FRANK, , ,**

Mailing Address 7 CASTLECREEK CT

City  
DALLASState  
TXZip Code  
75225-1808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.53

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663979**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAYCE, RICHARD, , ,**

Mailing Address 5801 NAPLES DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-2306FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664543**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661911**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1658 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANCELLOR CASE, NANCY, J., MS.,**Mailing Address 24001 CINCO VILLAGE CENTER BLVD  
APT 1134City  
KATYState  
TXZip Code  
77494-8420FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1082.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662072

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City

FLUSHING

State  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661484

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City

FLUSHING

State  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661493

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

45.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1659 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661494

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661495

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661497

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1660 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.86

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661498**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHAVERA, OFILIA, , ,**

Mailing Address 3100 TWISTED CREEK

City  
SAN ANTONIOState  
TXZip Code  
78230-4046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1048.13

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662678**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHRESTENSEN, PAUL, , ,**

Mailing Address 148 EDGEMERE WAY S

City  
NAPLESState  
FLZip Code  
34105-7107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.96

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662977**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.03



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1661 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHRESTENSEN, PAUL, , ,**

Mailing Address 148 EDGEMERE WAY S

City  
NAPLESState  
FLZip Code  
34105-7107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.96

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27662985

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHRESTENSEN, PAUL, , ,**

Mailing Address 148 EDGEMERE WAY S

City  
NAPLESState  
FLZip Code  
34105-7107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.96

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663498

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CIRCLE, RUTH ANN, , ,**

Mailing Address 3344 TIMBERLAKE RD NW

City  
KENNESAWState  
GAZip Code  
30144-1940FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663942

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1662 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENS

State  
AL

Zip Code  
35611-8681

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNERSTONE DETENTION

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27664350**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENS

State  
AL

Zip Code  
35611-8681

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNERSTONE DETENTION

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27664351**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLARK, CHARLES, , ,**

Mailing Address 522 CLYDESDALE DRIVE

City  
NEW HOPE

State  
PA

Zip Code  
18938-5816

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

277.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27662642**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

16.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1663 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLOSSON, CHARLES, , ,**

Mailing Address 134 BOBAROSA AVENUE

City  
MURPHYSBOROState  
ILZip Code  
62966-6144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664021

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLEMAN, KATHLEEN, , ,**

Mailing Address 7348 SECREST CT

City  
ARVADAState  
COZip Code  
80007-7621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662857

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINS, GORMON, , MR.,**

Mailing Address 271 S FRONT AVE

City  
PRESTONSBURGState  
KYZip Code  
41653-7876FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WDOC INCOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662521

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1664 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.49

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662009**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.49

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662012**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.49

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663246**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

71.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1665 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664466**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONSTANZI, CHARLES, B., ,**

Mailing Address P.O. BOX 670

City  
PRINCETONState  
LAZip Code  
71067-0670FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

743.52

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663248**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONSTANTINE, RUSSELL, , ,**

Mailing Address 209 ROBIN HOOD DR

City  
COVINGTONState  
LAZip Code  
70433-4762FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.66

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661800**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1666 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COSMO, LARRY, , ,**

Mailing Address 5207 THE POINTE

City  
ENGLEWOODState  
FLZip Code  
34223-8108FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663737

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COTTER, CHRISTOPHER, B., ,**

Mailing Address 6441 E MESCAL ST

City  
SCOTTSDALEState  
AZZip Code  
85254-5057FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TUTTLE CLICKOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662841

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTONState  
IAZip Code  
50131-4796FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662430

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

240.54

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1667 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTON

State  
IA

Zip Code  
50131-4796

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27663702**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRIST, JACK, , ,**

Mailing Address 1944 UNIVERSITY PARK DR

City  
SACRAMENTO

State  
CA

Zip Code  
95825-8211

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27662337**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CROZIER, MARILYN, , ,**

Mailing Address 11928 FARWELL ROAD

City  
PHILADELPHIA

State  
PA

Zip Code  
19154-3419

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.22

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27663099**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

74.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1668 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CROZIER, MARILYN, , ,**

Mailing Address 11928 FARWELL ROAD

City  
PHILADELPHIAState  
PAZip Code  
19154-3419FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663123

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CUOMO, ANTHONY, , MR.,**

Mailing Address 10167 GRANDVIEW DR.

City  
LA MESAState  
CAZip Code  
91941-6839FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PULMIDOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664514

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CUOMO, ANTHONY, , MR.,**

Mailing Address 10167 GRANDVIEW DR.

City  
LA MESAState  
CAZip Code  
91941-6839FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PULMIDOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664515

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.31



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1669 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CUOMO, ANTHONY, , MR.,**

Mailing Address 10167 GRANDVIEW DR.

City  
LA MESAState  
CAZip Code  
91941-6839FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PULMIDOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664516

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CUOMO, ANTHONY, , MR.,**

Mailing Address 10167 GRANDVIEW DR.

City  
LA MESAState  
CAZip Code  
91941-6839FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PULMIDOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664517

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CUOMO, ANTHONY, , MR.,**

Mailing Address 10167 GRANDVIEW DR.

City  
LA MESAState  
CAZip Code  
91941-6839FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PULMIDOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664519

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1670 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CUOMO, ANTHONY, , MR.,**

Mailing Address 10167 GRANDVIEW DR.

City  
LA MESAState  
CAZip Code  
91941-6839FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PULMIDOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664521

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURTIN, DINO, ALLEN, MR.,**

Mailing Address 228 U ST

City  
RIO LINDAState  
CAZip Code  
95673-1337FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1405.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663526

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DALTON, RAYMOND, , ,**

Mailing Address 2536 UNA ANTIOCH PIKE

City  
ANTIOCHState  
TNZip Code  
37013-2908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EXEC AIROccupation (for Individual)  
PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664416

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

199.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1671 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DANSE, ILENE, , MS.,**

Mailing Address P.O. BOX 830249

City  
RICHARDSONState  
TXZip Code  
75083-0249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662873**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DARLING, GARY, , ,**

Mailing Address 501 E GUIDRY ST

City  
COVINGTONState  
LAZip Code  
70433-3942FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663236**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAVIS, CLAUDE, A., ,**

Mailing Address 6752 TAYLOR WOODS LN

City  
PLEASANT GARDENState  
NCZip Code  
27313-8139FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
RETAIL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

206.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663224**

Amount of Each Receipt this Period

10.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1672 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAVIS, NANCY, , ,**

Mailing Address 9410 SE 174TH LOOP

City  
SUMMERFIELDState  
FLZip Code  
34491-6457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663156**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAY, CAROLYN, , ,**

Mailing Address 15757 PINES BLVD

City  
PEMBROKE PINESState  
FLZip Code  
33027-1207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663425**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAY, CAROLYN, , ,**

Mailing Address 15757 PINES BLVD

City  
PEMBROKE PINESState  
FLZip Code  
33027-1207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

466.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663727**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1673 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEAN, JOHN, , , JR.**

Mailing Address P.O. BOX 272

City  
LELANDState  
MSZip Code  
38756-0272FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.66

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663160**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661825**

Amount of Each Receipt this Period

37.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DECKERHOFF, LARRY, , ,**

Mailing Address 33 SUMMER COURT

City  
SPRINGState  
TXZip Code  
77381-6229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TECH MOccupation (for Individual)  
AVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662771**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1674 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEMPSEY, GORDON, H., MR.,**Mailing Address 8020 FRANKFORD RD  
APT 425City  
DALLASState  
TXZip Code  
75252-6863FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.84

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663656**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEPUY, GALE, , ,**

Mailing Address 13145 ST RT 26

City  
MARIETTAState  
OHZip Code  
45750-7714FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.02

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664159**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEVERS, RONALD, , ,**

Mailing Address 2965 CHERRY BLOSSOM LOOP

City  
SAINT CLOUDState  
FLZip Code  
34771-9339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.12

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662493**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1675 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIBARTOLOMEO, BETTY, M., MS.,**

Mailing Address 135 OAKMONT CIR.

City  
PINEHURSTState  
NCZip Code  
28374-8342FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663801**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIDOMINICIS, JUDITH, A., ,**

Mailing Address 224E SPRINGMEADOW DR.

City  
HOLBROOKState  
NYZip Code  
11741-4129FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663065**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIEZ, ROBERT, A., MR.,**

Mailing Address 1111 TINSMAN RD

City  
FENTONState  
MIZip Code  
48430-1679FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SUPREME GEAROccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664076**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

119.85

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1676 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOANE, JIM, P., MR.,**

Mailing Address 3460 MINGLEWOOD DR.

City  
BEAUMONTState  
TXZip Code  
77703-2736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662440**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOBBIE, ANN, , ,**

Mailing Address 163 WEST STERLING POND CIRCLE

City  
SPRINGState  
TXZip Code  
77382-1006FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PET SITTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.08

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663148**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOLLARHIDE, ALICE, , ,**

Mailing Address 25437 33RD STREET

City  
SAN BERNARDINOState  
CAZip Code  
92404-2805FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.26

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662900**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.88



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1677 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DONAT, NICOLETTA, , ,**Mailing Address 1841 CENTRAL PARK AVE  
APT 1GCity  
YONKERSState  
NYZip Code  
10710-2946FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

621.13

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663585**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DORMAN, JAMES, L., MR.,**

Mailing Address 2710 MONTEREY BLVD

City  
BROOKFIELDState  
WIZip Code  
53005-3741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AMALGA COMPOSITES, INCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.83

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662598**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DORMAN, JAMES, L., MR.,**

Mailing Address 2710 MONTEREY BLVD

City  
BROOKFIELDState  
WIZip Code  
53005-3741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AMALGA COMPOSITES, INCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

773.83

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663832**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1678 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DORMAN, JAMES, L., MR.,**

Mailing Address 2710 MONTEREY BLVD

City  
BROOKFIELDState  
WIZip Code  
53005-3741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AMALGA COMPOSITES, INCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.83

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664331**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOW, GREG, , ,**

Mailing Address P.O. BOX 1040

City  
RICHLANDState  
WAZip Code  
99352-1040FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663945**

Amount of Each Receipt this Period

130.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DRIGGERS, PATRICIA, , ,**

Mailing Address 126 PECAN ROW LANE

City  
ALEXANDRIAState  
LAZip Code  
71303-8711FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

369.61

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663548**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

195.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1679 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUCHAMP, CHARLES, , ,**

Mailing Address 4712 PARIS DRIVE

City  
ORANGEState  
TXZip Code  
77632-1424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.56

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662660**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUGAN, MIKE, , ,**

Mailing Address 6618 LOWRY BLVD UNIT 315

City  
DENVERState  
COZip Code  
80230-6917FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.16

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663313**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNCAN, ALBERT, , ,**

Mailing Address 3318 DAWN DR

City  
MIDLANDState  
MIZip Code  
48642-4091FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.88

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663159**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1680 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNCAN, POLA, , ,**

Mailing Address 2724 E EAGLE VIEW STREET

City  
MERIDIANState  
IDZip Code  
83646-7622FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662882**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EACK, CRYSTAL, , ,**

Mailing Address 691 IONE AVENUE NORTHEAST

City  
SPRING LAKE PARKState  
MNZip Code  
55432-1146FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664404**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661861**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1681 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663457**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City

PAWLEYS ISLAND

State

SC

Zip Code

29585-6174

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.64

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662220**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City

TOWSON

State

MD

Zip Code

21204-4701

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661842**

Amount of Each Receipt this Period

48.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 1682 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMI, RODERICK, MAKOTO, MR.,**

Mailing Address 2096 CORWIN RD

City  
BULLHEAD CITYState  
AZZip Code  
86442-8795FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.19

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663198**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661745**

Amount of Each Receipt this Period

20.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.56

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661746**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1683 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661747

Amount of Each Receipt this Period

24.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661750

Amount of Each Receipt this Period

18.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661752

Amount of Each Receipt this Period

20.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1684 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EREMITY, FRANK, , ,**

Mailing Address 12 DARTMOUTH CT

City  
STREAMWOODState  
ILZip Code  
60107-2179FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.02

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663050**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.12

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663086**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FARRINGTON, ARTHUR, , ,**

Mailing Address 8145 MAJORS RIDGE WAY

City  
CUMMINGState  
GAZip Code  
30041-9359FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.24

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662741**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

137.01



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1685 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FASSNACHT, MARILYN, , ,**

Mailing Address 119 COFFEE MILL CREEK ROAD

City  
GEORGETOWNState  
TXZip Code  
78633-6015FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662215**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FEENEY, JUDY, , ,**

Mailing Address 453 SHAWCROFT RD

City  
FAYETTEVILLEState  
NCZip Code  
28311-2946FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RANGE19Occupation (for Individual)  
CONSULTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663667**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FELTON, RAY, , ,**

Mailing Address 1701 WILLIAMS CT APT 906

City  
COLUMBUSState  
GAZip Code  
31904-3913FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662058**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

243.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1686 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662160**

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FIELDS, PATRICIA, , MS.,**Mailing Address 3455 CAMINITO SIERRA  
UNIT 302City  
CARLSBADState  
CAZip Code  
92009-8668FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.73

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662318**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FIOLA, SHARON, , ,**

Mailing Address 2041 UTAH RD

City  
RANTOULState  
KSZip Code  
66079-9024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.91

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664248**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

103.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1687 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISHER, CYNTHIA, , ,**

Mailing Address 272 NEWPORT WAY

City  
TUCKERTONState  
NJZip Code  
08087-3650FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662803

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISHER, Nanci, R., ,**

Mailing Address 11260 TORRIE WAY,APT. A

City  
BEALETONState  
VAZip Code  
22712-7070FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662037

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLEMING, NORMA, , ,**

Mailing Address 414 NW KNIGHTS AVE., #613

City  
LAKE CITYState  
FLZip Code  
32055-7247FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663409

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.76

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1688 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLOYD, JAMES, , ,**

Mailing Address 4608 CLOUDVIEW ROAD

City  
FORT WORTHState  
TXZip Code  
76109-3326FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.41

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662643**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FOX, MICHAEL, , ,**Mailing Address 552 S RACCOON RD  
APT H18City  
YOUNGSTOWNState  
OHZip Code  
44515-3632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.93

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662006**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FOX, NORM, , ,**

Mailing Address 1200 VIRGINIA AVE

City  
LAKEWOODState  
OHZip Code  
44107-2431FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BHP MANAGEMENTOccupation (for Individual)  
HEALTHCARE MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663602**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

165.13

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1689 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRANK, ANDREW, , ,**

Mailing Address **447 CHAPARRAL DR.**

City  
**FOLSOM**

State  
**CA**

Zip Code  
**95630-6172**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**917.57**

Date of Receipt

**02 / 08 / 2025**

**Transaction ID : SA11A.27661520**

Amount of Each Receipt this Period

**4.75**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRANK, ANDREW, , ,**

Mailing Address **447 CHAPARRAL DR.**

City  
**FOLSOM**

State  
**CA**

Zip Code  
**95630-6172**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**917.57**

Date of Receipt

**02 / 08 / 2025**

**Transaction ID : SA11A.27662075**

Amount of Each Receipt this Period

**4.95**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FREEMAN, JOANN, , ,**

Mailing Address **3588 COLUMBINE DRIVE**

City  
**SAN JOSE**

State  
**CA**

Zip Code  
**95127-4928**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ST. OF CA IN-HOME SUPPORTIVE SERVICES**

Occupation (for Individual)  
**PROVIDER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**272.88**

Date of Receipt

**02 / 08 / 2025**

**Transaction ID : SA11A.27662867**

Amount of Each Receipt this Period

**36.44**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**46.14**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1690 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRITZ, JOHN, , MR.,**

Mailing Address P.O. BOX 3115

City  
BIG BEAR LAKEState  
CAZip Code  
92315-3115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663701

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRUGE, RUBY, JOYCE, ,**

Mailing Address 2004 HIGHWAY 103

City  
PORT BARREState  
LAZip Code  
70577-5310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

751.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662285

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRUGE, RUBY, JOYCE, ,**

Mailing Address 2004 HIGHWAY 103

City  
PORT BARREState  
LAZip Code  
70577-5310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

751.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662405

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

137.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1691 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRUGE, RUBY, JOYCE, ,**

Mailing Address 2004 HIGHWAY 103

City  
PORT BARREState  
LAZip Code  
70577-5310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

751.25

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664241**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRUSTACI, MARY, , ,**

Mailing Address 12991 NORTHWEST 5TH COURT

City  
PEMBROKE PINESState  
FLZip Code  
33028-3120FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MDCPSOccupation (for Individual)  
SUBSTITUTE TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.14

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663563**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FULDNER, CHRIS, T., MR.,**

Mailing Address 5035 STONEGATE CT

City  
SPRINGFIELDState  
MOZip Code  
65809-4013FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.44

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662276**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

167.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1692 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FUNK, MARK, S., MR.,**

Mailing Address PO BOX 2479

City  
GARDNERVILLEState  
NVZip Code  
89410-2479FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663247

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALETAR, JUDY, , ,**

Mailing Address 100 TIMBERLANE DR

City  
CARTHAGEState  
TXZip Code  
75633-2229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PANDA L COLLEGEOccupation (for Individual)  
EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.87

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27664246

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663157

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.76



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1693 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663935

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661771

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663072

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1694 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAVINO, HENRY, , , III**

Mailing Address 386 DRIFTWOOD TERRACE

City  
BOCA RATONState  
FLZip Code  
33431-8259FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.88

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664440**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664189**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GHAZIL, JAMES, A., DR.,**

Mailing Address 3028 JAMACHA VIEW DR

City  
EL CAJONState  
CAZip Code  
92019-5135FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.90

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661877**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

61.88

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1695 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GHEBREMEDHIN, BERHANE, , ,**

Mailing Address 1520 DOVE CY

City  
PASADENAState  
CAZip Code  
91107-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DPSS LA COUNTYOccupation (for Individual)  
ELIGIBILITY SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1270.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664457**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILL, LAWRENCE, , ,**

Mailing Address POB 176

City  
ABILENEState  
TXZip Code  
79604-0176FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MATTHEWS OFCOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661586**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILL, LAWRENCE, , ,**

Mailing Address POB 176

City  
ABILENEState  
TXZip Code  
79604-0176FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MATTHEWS OFCOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661588**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1696 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILLESPIE, CLAIRE, , MS.,**

Mailing Address 718 POETS CORNER WAY

City  
KNOXVILLEState  
TNZip Code  
37919-7196FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GILLESPIE IMPORTSOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662248**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILLIAM, BOBBY, S., MR.,**

Mailing Address 400 TRAVIS ST STE 1700

City  
SHREVEPORTState  
LAZip Code  
71101-3126FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661828**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILLMAN, JACKIE, C., MRS.,**

Mailing Address 306 COLONIAL DRIVE

City  
FRIENDSWOODState  
TXZip Code  
77546-4023FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MORIOccupation (for Individual)  
ADMINISTRATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663879**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

296.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1697 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILLMAN, JACKIE, C., MRS.,**

Mailing Address 306 COLONIAL DRIVE

City  
FRIENDSWOODState  
TXZip Code  
77546-4023FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MORIOccupation (for Individual)  
ADMINISTRATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.81

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663883**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILLMAN, JACKIE, C., MRS.,**

Mailing Address 306 COLONIAL DRIVE

City  
FRIENDSWOODState  
TXZip Code  
77546-4023FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MORIOccupation (for Individual)  
ADMINISTRATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.81

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663887**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILLMAN, JACKIE, C., MRS.,**

Mailing Address 306 COLONIAL DRIVE

City  
FRIENDSWOODState  
TXZip Code  
77546-4023FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MORIOccupation (for Individual)  
ADMINISTRATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.81

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663892**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1698 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIRVIN, JOANN, , MRS.,**

Mailing Address 7110 CREEKSIDE DR.

City  
LANSINGState  
MIZip Code  
48917-9618FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661992**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLADSTONE, VICKI, , ,**

Mailing Address 12 ENCORE LN

City  
ALISO VIEJOState  
CAZip Code  
92656-2810FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TVT SCHOOLOccupation (for Individual)  
RECEPTIONIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662400**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLOVER, AVERIL, , ,**

Mailing Address 446 LANCASHIRE RUN

City  
SMITHFIELDState  
NCZip Code  
27577-8029FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661910**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1699 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GODWIN, WESLEY, , ,**

Mailing Address 1269 E LAFAYETTE COURT

City  
SPRINGFIELDState  
MOZip Code  
65804-7494FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GODWIN AND ASSOCIATESOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.45

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663098**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOTTWIG, JOHN, , ,**

Mailing Address 19422 S MUNSON ROAD

City  
MOLALLAState  
ORZip Code  
97038-8666FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.50

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662001**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRABER, GARY, , MR.,**

Mailing Address 9927 TERRITORY LN

City  
HOUSTONState  
TXZip Code  
77064-5227FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662980**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1700 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAHAM, JOSEPH, , ,**

Mailing Address 106 LAKEVIEW LANE

City  
HEADLANDState  
ALZip Code  
36345-2202FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662632

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAINGER, SUSAN, , ,**

Mailing Address P.O. BOX 2898

City  
SANTA MARIAState  
CAZip Code  
93457-2898FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662593

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAY, KAREN, , ,**

Mailing Address 208 BUCKINGHAM DR.

City  
KYLEState  
TXZip Code  
78640-5821FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662207

Amount of Each Receipt this Period

6.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

147.47



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1701 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663379**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663436**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663625**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

196.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1702 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663679**

Amount of Each Receipt this Period

21.07

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, LINCOLN, I., MR., JR.**Mailing Address 1002 ALTAVITA CT  
APT 210City  
LONGMONTState  
COZip Code  
80503-3684FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661695**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, LINDA, , ,**

Mailing Address 15657 FM 244

City  
IOLAState  
TXZip Code  
77861-3867FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662275**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.07

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1703 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, LINDA, , ,**

Mailing Address 15657 FM 244

City  
IOLA

State  
TX

Zip Code  
77861-3867

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.70

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27663253**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, LINDA, , ,**

Mailing Address 15657 FM 244

City  
IOLA

State  
TX

Zip Code  
77861-3867

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.70

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27663539**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREGORY, ALAN, W., ,**

Mailing Address 4524 INDIAN CABIN TER

City  
HAMMONTON

State  
NJ

Zip Code  
08037-3915

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.50

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27663485**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

127.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1704 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIFFIN, DREW, , ,**

Mailing Address 2209 SHERWOOD HALL LN

City  
ALEXANDRIAState  
VAZip Code  
22306-2743FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INVARIANTOccupation (for Individual)  
GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661670

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROEFSEMA, GLENN, , ,**

Mailing Address 10122 87TH AVE SW

City  
LAKEWOODState  
WAZip Code  
98498-4459FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661779

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROEFSEMA, GLENN, , ,**

Mailing Address 10122 87TH AVE SW

City  
LAKEWOODState  
WAZip Code  
98498-4459FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663628

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2538.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1705 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661656**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROUND, JIM, , ,**

Mailing Address 9791 E DREYFUS AVE

City  
SCOTTSDALEState  
AZZip Code  
85260-4450FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661844**

Amount of Each Receipt this Period

38.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROUND, JIM, , ,**

Mailing Address 9791 E DREYFUS AVE

City  
SCOTTSDALEState  
AZZip Code  
85260-4450FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

937.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664387**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1706 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUTHRIE, ANN, , ,**

Mailing Address 30280 NORTHGATE DR.

City  
SOUTHFIELDState  
MIZip Code  
48076-1027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662340

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAAS, RICHARD, , ,**

Mailing Address 318BOCA DEL CANON

City  
SAN CLEMENTEState  
CAZip Code  
92672-5402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662282

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAAS, RICHARD, , ,**

Mailing Address 318BOCA DEL CANON

City  
SAN CLEMENTEState  
CAZip Code  
92672-5402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

551.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662284

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

82.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1707 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HACKMAN, MARY, E., ,**Mailing Address 3000 GALLOWAY RDG  
APT G103City  
PITTSBOROState  
NCZip Code  
27312-8691FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662341

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERYState  
ALZip Code  
36117-7558FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664293

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERYState  
ALZip Code  
36117-7558FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

854.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664298

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1708 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMILTON, BETTY, , ,**

Mailing Address 18037 STONEBROOK DR

City  
NORTHVILLEState  
MIZip Code  
48168-4345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.35

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662432**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMLIN, DENNIS, , ,**

Mailing Address 18735 CORSINI DRIVE

City  
SAN ANTONIOState  
TXZip Code  
78258-1629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.04

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662225**

Amount of Each Receipt this Period

30.19

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRAH, TONY, , ,**

Mailing Address 355 BOXINGTON WAY

City  
SPARKSState  
NVZip Code  
89434-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2456.46

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662898**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

183.27



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1709 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRELL, JULIE, B., MS.,**Mailing Address 3433 WESTHEIMER ROAD  
501City  
HOUSTONState  
TXZip Code  
77027-5529FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662028**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRIS, MARY, , ,**

Mailing Address 118 KOPECKY ROAD

City  
SELMAState  
ALZip Code  
36701-6921FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.10

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663417**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRISON, PATRICIA, , ,**Mailing Address 707 NORTH SHEPHERD DRIVE  
SUITE 700City  
HOUSTONState  
TXZip Code  
77007-1351FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

491.17

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663191**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1710 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, BARBARA, A., MS.,**

Mailing Address 9112 W 131ST TER.

City  
OVERLAND PARKState  
KSZip Code  
66213-3096FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.95

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662818**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAY, KATHY, , ,**

Mailing Address 3 QUAIL VALLEY ROAD

City  
SHERWOODState  
ARZip Code  
72120-9625FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.43

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661721**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAYES, ROGER, , ,**

Mailing Address 129 OLD TIMBER LN

City  
MOORESVILLEState  
NCZip Code  
28117-5824FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663285**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1711 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664147**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664151**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEGWER, ELLEN, R., MS.,**

Mailing Address 76504 VIA CHIANTI

City  
INDIAN WELLSState  
CAZip Code  
92210-7808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

607.13

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663447**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1712 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEINRICH, SARAH, J., MRS.,**

Mailing Address 6004 AMBER OAKS AVE

City  
BAKERSFIELDState  
CAZip Code  
93306-7008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.54

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662398**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEITZ, MARK, V., MR.,**

Mailing Address 260 SW YORKSHIRE ROAD

City  
TOPEKAState  
KSZip Code  
66606-2283FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1438.73

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663009**

Amount of Each Receipt this Period

312.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENLEY, DOY, B., MR.,**

Mailing Address 14251 MIMOSA LANE

City  
TUSTINState  
CAZip Code  
92780-2334FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6843.04

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662509**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

582.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1713 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENTHORN, JIM, , ,**

Mailing Address 242 COUNTY HIGHWAY 183 NORTH

City  
DEFUNIAK SPRINGSState  
FLZip Code  
32433-4394FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.77

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662206**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERROLD, BARBARA, J., MRS.,**

Mailing Address 3738 MARSBELLA PL

City  
KALAMAZOOState  
MIZip Code  
49006-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
K O PRODUCTSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.47

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662639**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERZINGER, LARRY, G., MR.,**

Mailing Address 4514 WINDSWEPT DR.

City  
MILFORDState  
MIZip Code  
48380-2776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661812**

Amount of Each Receipt this Period

48.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1714 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HESS, SUZANNE, , ,**

Mailing Address 5590 N BARRASCA AVE

City  
TUCSONState  
AZZip Code  
85750-6494FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664179**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HICKS, JERRY, , ,**

Mailing Address 1261 DENALI DR, #146

City  
FESTUSState  
MOZip Code  
63028-2382FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663434**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HICKS, JERRY, , ,**

Mailing Address 1261 DENALI DR, #146

City  
FESTUSState  
MOZip Code  
63028-2382FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

609.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664148**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1715 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIEBERT, CHARLYN, , ,**

Mailing Address 4334 YORK BLVD

City  
LOS ANGELESState  
CAZip Code  
90041-3220FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NPOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.99

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661921**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HIGGINS, NEILA, , ,**

Mailing Address 3916 N POTSDAM AVE #3760

City  
SIOUX FALLSState  
SDZip Code  
57104-7048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663724**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIGHTOWER, JOHN, , ,**

Mailing Address 2115 SE 31ST ST

City  
OKEECHOBEEState  
FLZip Code  
34974-6721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.63

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664454**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

127.05

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1716 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, DONALD, A., MR.,**

Mailing Address 8604 WEST ARLINGTON RD.

City  
HUTCHINSON

State  
KS

Zip Code  
67501-8532

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.85

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27663264**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, RICHARD, , ,**

Mailing Address 8085 SMOKING JACKET PL

City  
LAS VEGAS

State  
NV

Zip Code  
89166-3792

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.52

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27661552**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, ROSALIE, , ,**

Mailing Address 8824 33RD ST E

City  
EDGEWOOD

State  
WA

Zip Code  
98371-2803

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.18

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27662938**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

79.75



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1717 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWN

State  
NJ

Zip Code  
08057-2931

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENT

Occupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27662288**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWN

State  
NJ

Zip Code  
08057-2931

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENT

Occupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27662456**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWN

State  
NJ

Zip Code  
08057-2931

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENT

Occupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27662457**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

129.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1718 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662458

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662459

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662465

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1719 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HINTZ, DENNIS, W., MR.,**

Mailing Address 1087 JOHANNA DR.

City  
BALLWINState  
MOZip Code  
63021-6400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662832**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HODGE, LINDA, , MS.,**

Mailing Address 21 PERKINS RD

City  
GREENWICHState  
CTZip Code  
06830-3510FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663325**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOEL, NANCY, , ,**

Mailing Address 241 GREENBRIAR RD

City  
BEECH MOUNTAINState  
NCZip Code  
28604-8079FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664301**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

181.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1720 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOFF, JOHN, , ,

Mailing Address 2201 W. SINTO

City  
SPOKANEState  
WAZip Code  
99201-2946FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663675

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOFF, JOHN, , ,

Mailing Address 2201 W. SINTO

City  
SPOKANEState  
WAZip Code  
99201-2946FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663676

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOFF, JOHN, , ,

Mailing Address 2201 W. SINTO

City  
SPOKANEState  
WAZip Code  
99201-2946FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

379.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663685

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

72.89

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1721 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOFFMAN, CAROLYN, , ,**

Mailing Address 7619 MARYLAND AVE

City  
SAINT LOUISState  
MOZip Code  
63105-3803FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

906.48

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661593**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLINGTON, MARGARET, , ,**

Mailing Address 9960 ATRIUM WAY APT 514

City  
JACKSONVILLEState  
FLZip Code  
32225-6447FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.13

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663214**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLLSTEIN, CAROLYN, , ,**

Mailing Address 11691 S RIDGEVIEW RD. APT. 303

City  
OLATHEState  
KSZip Code  
66061-6679FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.29

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661816**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1722 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLMES, SANDRA, , ,**

Mailing Address P.O. BOX 6905

City  
LAGUNA NIGUELState  
CAZip Code  
92607-6905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.78

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664475**

Amount of Each Receipt this Period

80.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLMES, SANDRA, , ,**

Mailing Address P.O. BOX 6905

City  
LAGUNA NIGUELState  
CAZip Code  
92607-6905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.78

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664476**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLMES, SANDRA, , ,**

Mailing Address P.O. BOX 6905

City  
LAGUNA NIGUELState  
CAZip Code  
92607-6905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

577.78

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664477**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

204.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1723 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLMES, SANDRA, , ,**

Mailing Address P.O. BOX 6905

City  
LAGUNA NIGUELState  
CAZip Code  
92607-6905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.78

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664478**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOPKINS, GEORGE, , ,**

Mailing Address 135 CR 2984

City  
HUGHES SPRINGSState  
TXZip Code  
75656-6715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.85

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662177**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOWARD, VICTOR, , ,**

Mailing Address 616 BRIDGEMAN LN

City  
ROMEIOVILLEState  
ILZip Code  
60446-5195FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663623**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1724 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOWELL, ANITA, , ,**

Mailing Address 208 VISTA CLIFF CIRCLE

City  
CASTLE ROCKState  
COZip Code  
80104-5527FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663199

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOWELL, STEVEN, , ,**

Mailing Address 1836 NORFOLK STREET

City  
HOUSTONState  
TXZip Code  
77098-4306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662246

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBBARD, BARBARA, A., MS.,**

Mailing Address P.O. BOX 1736

City  
LAS CRUCESState  
NMZip Code  
88004-1736FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

734.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663481

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

331.34



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1725 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUBEK, SUSAN, JANE, ,**

Mailing Address 4 WOODED LANE

City  
ALLENState  
TXZip Code  
75013-2955FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KELLER WILLIAMS REALTYOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661856

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUGGINS, TINA, , MS.,**

Mailing Address 3707 WIMBLEDON RD

City  
NASHVILLEState  
TNZip Code  
37215-1819FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661707

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUNT, SUSAN, , ,**

Mailing Address 522 N CANADIAN TER

City  
MUSTANGState  
OKZip Code  
73064-6105FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664489

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1726 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUTCHINSON, ROBERT, , ,**

Mailing Address 37 WHIPOWILL BEND

City  
THOMASVILLEState  
GAZip Code  
31757-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664296**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HYLBERT, PAUL, WILLIAM, MR.,**

Mailing Address 6899 GULF OF MEXICO DR.

City  
LONGBOAT KEYState  
FLZip Code  
34228-1336FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KODIAK BUILDING PARTNERSOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662304**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661651**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1727 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662547**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. INABINET, DEBORAH, O., ,**

Mailing Address 4939 VICTORIA AVENUE

City

NORTH CHARLESTON

State

SC

Zip Code

29405-4223

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663761**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. INABINET, DEBORAH, O., ,**

Mailing Address 4939 VICTORIA AVENUE

City

NORTH CHARLESTON

State

SC

Zip Code

29405-4223

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1481.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663773**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.51

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1728 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IRRIGER, HEINZ, , MR.,**

Mailing Address P.O. BOX 3068  
2798 MONTANA 206

City  
COLUMBIA FALLS

State  
MT

Zip Code  
59912-3068

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**02** / **08** / **2025**

**Transaction ID : SA11A.27663469**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ISBELL, BETTYE, , ,**

Mailing Address 9806 JOHN ROLFE DR.

City  
SAN ANTONIO

State  
TX

Zip Code  
78230-3212

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.65

Date of Receipt

**02** / **08** / **2025**

**Transaction ID : SA11A.27663424**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IVAN, LAJOS, , ,**

Mailing Address 16 SARATOGA AVE.

City  
BOUND BROOK

State  
NJ

Zip Code  
08805-1232

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.16

Date of Receipt

**02** / **08** / **2025**

**Transaction ID : SA11A.27662382**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

88.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1729 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAMES, MARK, , ,**

Mailing Address 5704 SANIBEL BAY

City  
NORTH LAS VEGASState  
NVZip Code  
89031-7223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662257

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662486

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JARZEBOWSKI, MACIE, , ,**

Mailing Address 753 E SHORE DR.

City  
SUMMERLAND KEYState  
FLZip Code  
33042-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663370

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

137.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1730 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAUDES, MARY, K., MRS.,**

Mailing Address 12657 BRADFORD WOODS DR.

City  
SAINT LOUISState  
MOZip Code  
63127-1360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.95

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663017**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JEANS, JOHN, , ,**Mailing Address 235 INVERNESS CENTER DRIVE  
APT 201City  
BIRMINGHAMState  
ALZip Code  
35242-5606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.52

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662048**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JENNINGS, PAULA, , ,**

Mailing Address 122 QUAIL RUN DR.

City  
WARNER ROBINSState  
GAZip Code  
31088-6504FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

656.25

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663116**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

137.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1731 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JENSEN, V., GAIL, ,**

Mailing Address 405 ANGLERSDRIVE, UNIT 1-185

City  
STEAMBOAT SPRINGSState  
COZip Code  
80487-9352FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.50

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663329**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JENSEN, V., GAIL, ,**

Mailing Address 405 ANGLERSDRIVE, UNIT 1-185

City  
STEAMBOAT SPRINGSState  
COZip Code  
80487-9352FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.50

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663338**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEWETT, STEVEN, , ,**

Mailing Address 31896 BIRCHWOOD DRIVE

City  
LAKE ELSINOREState  
CAZip Code  
92532-2628FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661942**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1732 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEWETT, STEVEN, , ,**

Mailing Address 31896 BIRCHWOOD DRIVE

City  
LAKE ELSINOREState  
CAZip Code  
92532-2628FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662469**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, BRUCE, W., ,**

Mailing Address 12216 GREY BIRCH CIR

City  
ORLANDOState  
FLZip Code  
32832-5701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664332**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, DONALD, , ,**

Mailing Address 35 MALLARD BEACH DRIVE

City  
ELWOODState  
NEZip Code  
68937-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663118**

Amount of Each Receipt this Period

130.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

202.88



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1733 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, PHIL, , MR.,**

Mailing Address 488 BRACKENWOOD LANE S

City  
PALM BEACH GARDENSState  
FLZip Code  
33418-9052FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VAPORSHIELDOccupation (for Individual)  
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1357.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663092

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGSState  
IDZip Code  
83276-1671FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661635

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, SUSAN, J., MS.,**

Mailing Address 3418 E SUNCREST CT

City  
PHOENIXState  
AZZip Code  
85044-3506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRAFFICADEOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

431.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662180

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

294.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1734 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOLLEY, SUE, , MS.,**

Mailing Address 2807 CROSSVINE CIRCLE

City  
THE WOODLANDSState  
TXZip Code  
77380-1396FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

**Transaction ID : SA11A.27663456**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, CHARLES, , ,**

Mailing Address 4 LOS ARBOLES CT.

City  
DALLASState  
TXZip Code  
75230-3052FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1486.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

**Transaction ID : SA11A.27662636**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, DEBORAH, , ,**

Mailing Address 871 SUMMER BREEZE CT

City  
GRAND JUNCTIONState  
COZip Code  
81506-6701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

**Transaction ID : SA11A.27662542**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

336.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1735 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, JANET, , ,**

Mailing Address 2401 STANFORD ROAD

City  
PANAMA CITYState  
FLZip Code  
32405-3589FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AYA HEALTHCAREOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661667

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, JANET, , ,**

Mailing Address 2401 STANFORD ROAD

City  
PANAMA CITYState  
FLZip Code  
32405-3589FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AYA HEALTHCAREOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661672

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, JANET, , ,**

Mailing Address 2401 STANFORD ROAD

City  
PANAMA CITYState  
FLZip Code  
32405-3589FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AYA HEALTHCAREOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662987

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

101.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1736 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, PAT, A., ,**

Mailing Address 5471 CEDAR BRANCH CIR.

City  
INDIANAPOLISState  
INZip Code  
46268-3925FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.99

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27662635

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, PAT, A., ,**

Mailing Address 5471 CEDAR BRANCH CIR.

City  
INDIANAPOLISState  
INZip Code  
46268-3925FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.99

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663254

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOYCE, RICHARD, , ,**Mailing Address 1350 E NORTH ST  
LOT 84City  
CROWN POINTState  
INZip Code  
46307-6400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

284.31

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27661485

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8.08

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1737 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOYCE, RICHARD, , ,**

Mailing Address 1350 E NORTH ST  
LOT 84

City  
CROWN POINT

State  
IN

Zip Code  
46307-6400

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.31

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27661491**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAUFF, WALLACE, , ,**

Mailing Address 1416 10TH COURT

City  
LAKE PARK

State  
FL

Zip Code  
33403-2007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

884.85

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27664033**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAVAL, KATHLEEN, , ,**

Mailing Address 1596 WANTAGH AVE.

City  
WANTAGH

State  
NY

Zip Code  
11793-3902

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.62

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27662154**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

145.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1738 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEEN, JACK, W., MR.,**

Mailing Address 7016 DA VINCI

City  
COLLEYVILLEState  
TXZip Code  
76034-8262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WNM COMMUNICATIONSOccupation (for Individual)  
CHAIRMAN OF THE BOARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1433.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662650

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEMP, KIRKLAND, , ,**Mailing Address 2188 WASHINGTON AVE  
1City  
BRONXState  
NYZip Code  
10457-2589FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662222

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KENT, BRAD, , ,**

Mailing Address 1897 W SUTTON RD

City  
OTHELLOState  
WAZip Code  
99344-9048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663635

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

183.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1739 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KERR, KAT, , ,**

Mailing Address P O BOX 550989

City  
JACKSONVILLEState  
FLZip Code  
32255-0989FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTHOR SPEAKER PROPHET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663056**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KERR, KAT, , ,**

Mailing Address P O BOX 550989

City  
JACKSONVILLEState  
FLZip Code  
32255-0989FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTHOR SPEAKER PROPHET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663216**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, MCTONY, , ,**

Mailing Address 4882 ADAMS CHAPEL RD

City  
DEARINGState  
GAZip Code  
30808-2508FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662716**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1740 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KING, TANYA, LUNN, MRS.,**

Mailing Address 1048 ELLERBE CT.

City  
SHREVEPORTState  
LAZip Code  
71106-7757FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.38

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662852**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIRBY, ERROL, , MR.,**

Mailing Address 2895 TOBIANO DR.

City  
RENOState  
NVZip Code  
89521-8022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

797.65

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661888**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.01

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662391**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.56



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1741 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.01

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662839**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNOWLES, KAREN, , ,**

Mailing Address 308 GRAVES DRIVE

City  
FORESTState  
VAZip Code  
24551-2622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CENTRA HEALTHOccupation (for Individual)  
SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

794.75

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664041**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOEHL, KENNETH, , MR.,**

Mailing Address RR 2 BOX 104

City  
HANCOCKState  
MNZip Code  
56244-2503FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.30

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664405**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.77

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1742 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661532**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KORMYLO, KENT, , MR.,**

Mailing Address 4751 E 3900 N

City  
EDENState  
UTZip Code  
84310-1719FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.10

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661533**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KRAUTSCHUN, HARVEY, , ,**

Mailing Address 10791 CHICKEN CREEK ROAD

City  
SPEARFISHState  
SDZip Code  
57783-4111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.10

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662687**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1743 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KRESSGAGER, CINDY, , ,**

Mailing Address 419 CROCKETT STREET

City  
CHANNELVIEWState  
TXZip Code  
77530-4323FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663926

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LACKEY, ANN, , ,**

Mailing Address 1117 SPRUCE STREET

City  
LAKE OSWEGOState  
ORZip Code  
97034-6153FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664136

Amount of Each Receipt this Period

2.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LALONDE, RICHARD , , ,**

Mailing Address 3332 NW 47TH CT

City  
OCALAState  
FLZip Code  
34482-8322FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

938.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663112

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

87.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 1744 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LALONDE, RICHARD , , ,**

Mailing Address 3332 NW 47TH CT

City  
OCALAState  
FLZip Code  
34482-8322FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

938.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664291

Amount of Each Receipt this Period

0.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAMB, FRANK, , ,**

Mailing Address 2346WEST COLLEGE AVE

City

SANTA ROSA

State

CA

Zip Code

95401-4951

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662855

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAMPING, DOUG, R., MR.,**

Mailing Address 1433 SOUTH 35 EAST

City

FARMINGTON

State

UT

Zip Code

84025-2004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UDCOccupation (for Individual)  
CO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

494.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663330

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

126.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1745 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANKFORD, KEITH, , MR.,**

Mailing Address 5309 REVERE ROAD

City  
DURHAMState  
NCZip Code  
27713-2540FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WAKE COUNTYOccupation (for Individual)  
PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662237**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANKFORD, KEITH, , MR.,**

Mailing Address 5309 REVERE ROAD

City  
DURHAMState  
NCZip Code  
27713-2540FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WAKE COUNTYOccupation (for Individual)  
PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662238**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANKFORD, KEITH, , MR.,**

Mailing Address 5309 REVERE ROAD

City  
DURHAMState  
NCZip Code  
27713-2540FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WAKE COUNTYOccupation (for Individual)  
PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

355.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663875**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1746 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANT, VICKI, , ,**

Mailing Address 200 DORSEY LANE

City  
MILTONState  
DEZip Code  
19968-1348FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664027**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LARSON, ALLAN, , ,**

Mailing Address BOX 68

City  
LAKE MILLSState  
IAZip Code  
50450-0068FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663914**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LARUE, PATRICIA, , ,**

Mailing Address 3137-B GOLDEN YEARS HOMESTEAD DR

City  
NEW HAVENState  
INZip Code  
46774-3003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661642**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

243.20

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1747 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	08	/	2025

**Transaction ID : SA11A.27663106**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	08	/	2025

**Transaction ID : SA11A.27664217**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	08	/	2025

**Transaction ID : SA11A.27664226**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

112.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1748 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664244**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAVERDIERE, RAYMOND, , ,**

Mailing Address 1517 CAMDEN WOODS TERRACE

City  
SAINT CLOUDState  
MNZip Code  
56301-9662FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662256**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAWVER, BILL, R., MR.,**

Mailing Address 8070 GRANITE OAKS DR.

City  
GRANITE BAYState  
CAZip Code  
95746-9530FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662774**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.77



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1749 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAWVER, BILL, R., MR.,**

Mailing Address 8070 GRANITE OAKS DR.

City  
GRANITE BAYState  
CAZip Code  
95746-9530FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663206

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEBRET, ARTHUR, M., ,**

Mailing Address 621 S FREYA ST

City  
SPOKANEState  
WAZip Code  
99202-5138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664539

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661708

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

127.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1750 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LELEUX, DAVID, , ,**

Mailing Address 3 HEATHERSTONE DR.

City  
LAFAYETTEState  
LAZip Code  
70508-4913FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGINEEROccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662045**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEWIS, ED, , ,**

Mailing Address 19585 NORTH 101ST STREET

City  
SCOTTSDALEState  
AZZip Code  
85255-3786FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.53

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663535**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEWISSMITH, ROSALIND, , MRS.,**

Mailing Address 503 CYPRESS LINKS WAY

City  
TAYLORSState  
SCZip Code  
29687-6473FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

913.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662145**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1751 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEYSHON, DAVID, W., MR.,**

Mailing Address 1608 HONEYSUCKLE CT

City  
WEST CHESTERState  
PAZip Code  
19380-4361FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SHELF STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.99

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661546**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEYSHON, DAVID, W., MR.,**

Mailing Address 1608 HONEYSUCKLE CT

City  
WEST CHESTERState  
PAZip Code  
19380-4361FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SHELF STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.99

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661547**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEYSHON, DAVID, W., MR.,**

Mailing Address 1608 HONEYSUCKLE CT

City  
WEST CHESTERState  
PAZip Code  
19380-4361FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SHELF STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

703.99

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661549**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

26.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1752 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEYSHON, DAVID, W., MR.,**

Mailing Address 1608 HONEYSUCKLE CT

City  
WEST CHESTERState  
PAZip Code  
19380-4361FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SHELF STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.99

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661553**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEYSHON, DAVID, W., MR.,**

Mailing Address 1608 HONEYSUCKLE CT

City  
WEST CHESTERState  
PAZip Code  
19380-4361FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SHELF STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.99

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661626**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINDENBERG, LARRY, , MR.,**

Mailing Address 846 DOERFLER DR.

City  
KIMBERLYState  
WIZip Code  
54136-2304FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

592.07

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663284**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1753 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINDSEY, JOHN, , MR.,**

Mailing Address 12416 WILLOW HILL DR.

City  
MOORPARK

State  
CA

Zip Code  
93021-2764

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
LINDSEY & LINDSEY

Occupation (for Individual)  
FINANCIAL ADVISOR/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.87

Date of Receipt

**02** / **08** / **2025**

**Transaction ID : SA11A.27661991**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LINDSEY, JOHN, , MR.,**

Mailing Address 12416 WILLOW HILL DR.

City  
MOORPARK

State  
CA

Zip Code  
93021-2764

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
LINDSEY & LINDSEY

Occupation (for Individual)  
FINANCIAL ADVISOR/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.87

Date of Receipt

**02** / **08** / **2025**

**Transaction ID : SA11A.27662000**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINDSEY, JOHN, , MR.,**

Mailing Address 12416 WILLOW HILL DR.

City  
MOORPARK

State  
CA

Zip Code  
93021-2764

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
LINDSEY & LINDSEY

Occupation (for Individual)  
FINANCIAL ADVISOR/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.87

Date of Receipt

**02** / **08** / **2025**

**Transaction ID : SA11A.27662361**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

80.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1754 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINDSEY, JOHN, , MR.,**

Mailing Address 12416 WILLOW HILL DR.

City  
MOORPARKState  
CAZip Code  
93021-2764FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LINDSEY & LINDSEYOccupation (for Individual)  
FINANCIAL ADVISOR/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.87

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662372**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LINNETTZ, RONALD, , ,**

Mailing Address 2483 S CALLE DEL DANTE

City  
GREEN VALLEYState  
AZZip Code  
85622-8276FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.10

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663490**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LITTLEJOHN, AILEEN, , ,**

Mailing Address 135 LAS BORREGAS

City  
BELENState  
NMZip Code  
87002-9560FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

587.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664314**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1755 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LITTLETON, MELVIN, , ,**

Mailing Address 224 WEST COTTER UNIT 201

City  
PORT ARANSASState  
TXZip Code  
78373-4404FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663622**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LITZAU, JEROME, , ,**

Mailing Address 300 E N SHORE DR. APT 14

City  
HARTLANDState  
WIZip Code  
53029-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.52

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662490**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOGAN, RODGER, , ,**

Mailing Address 10647 SKI CHASTE LN

City  
AXISState  
ALZip Code  
36505-4206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.65

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662039**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

191.15



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1756 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOHMANN, KIMBERLEY, , MS.,**

Mailing Address 12908B GRAYS POINTE RD

City  
FAIRFAXState  
VAZip Code  
22033-2156FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NORTHROP GRUMMANOccupation (for Individual)  
CONTRACTS ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.95

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662504**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOHMANN, KIMBERLEY, , MS.,**

Mailing Address 12908B GRAYS POINTE RD

City  
FAIRFAXState  
VAZip Code  
22033-2156FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NORTHROP GRUMMANOccupation (for Individual)  
CONTRACTS ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.95

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662865**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LONG, KAREN, , ,**

Mailing Address 300 GREENBRIAT ST

City  
BELTONState  
TNZip Code  
76613-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

283.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662817**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1757 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUMBER, MICHAEL, , MR.,**

Mailing Address 23077 SOUTHWEST NEWLAND ROAD

City  
WILSONVILLEState  
ORZip Code  
97070-6701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.64

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662351**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LYLES, RICHARD, A., ,**

Mailing Address 27211. MILLER. STREET

City  
PORT NECHESState  
TXZip Code  
77651-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663307**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LYNCH, JEFFREY, , ,**

Mailing Address 5922 MAPLESHADE LN

City  
DALLASState  
TXZip Code  
75252-2353FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LYNCH LAW FIRMOccupation (for Individual)  
TRIAL LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

332.07

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663782**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

154.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1758 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LYSTIG, CAROLYN, , ,**

Mailing Address 2155 6TH LANE SE, APT 206

City  
CAMBRIDGEState  
MNZip Code  
55008-2528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.58

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663423**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MA, CAROL, , ,**

Mailing Address 3411 WALES COURT

City  
ROWLAND HEIGHTSState  
CAZip Code  
91748-5139FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.54

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664464**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACDONALD, CARROLL, , ,**

Mailing Address 33575 N DOVE LAKES DR

City  
CAVE CREEKState  
AZZip Code  
85331-4102FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.63

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661966**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1759 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACDONALD, CARROLL, , ,**

Mailing Address 33575 N DOVE LAKES DR

City  
CAVE CREEKState  
AZZip Code  
85331-4102FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663846**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACEYKO, ROBERT, , ,**

Mailing Address 45 HIGHLAND AVE

City  
WALDENState  
NYZip Code  
12586-1429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BERNIES BUS SERVICE INC.Occupation (for Individual)  
SCHOOL BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663917**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACKEY, BERNARD, , ,**

Mailing Address PO BOX 241068

City  
OMAHAState  
NEZip Code  
68124-5068FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662540**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1760 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACMASTER, DONALD, , ,**

Mailing Address 301 TRANQUILLE PLACE

City  
MANDEVILLEState  
LAZip Code  
70471-1623FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ARGO FINE IMPORTS , LLCOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662070**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MADDEN, STEVE, , ,**

Mailing Address 16890 NORTH RIVER SHORES ROAD

City  
NORTHPORTState  
ALZip Code  
35475-2519FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661890**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MADDOX, MARTHA, , ,**

Mailing Address 5722 HOLLY HILL CIRCLE

City  
DALLASState  
TXZip Code  
75231-5314FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ARAPAH0 EAST INCOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661821**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

394.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1761 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MADDOX, MARTHA, , ,**

Mailing Address 5722 HOLLY HILL CIRCLE

City  
DALLASState  
TXZip Code  
75231-5314FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARAPAHO EAST INCOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.11

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663828

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MALAWER, MARTIN, , ,**

Mailing Address 913 FROME LN

City  
MC LEANState  
VAZip Code  
22102-2106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27662033

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663091

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

82.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1762 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARCINEK, KATHY, , ,**

Mailing Address 1016 MAIN ST

City  
FORD CITYState  
PAZip Code  
16226-9227FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664423**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARCINEK, KATHY, , ,**

Mailing Address 1016 MAIN ST

City  
FORD CITYState  
PAZip Code  
16226-9227FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664424**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARCINEK, KATHY, , ,**

Mailing Address 1016 MAIN ST

City  
FORD CITYState  
PAZip Code  
16226-9227FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664425**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1763 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARCINEK, KATHY, , ,**

Mailing Address 1016 MAIN ST

City  
FORD CITYState  
PAZip Code  
16226-9227FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664426**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARSHALL, ROBERT, , ,**

Mailing Address 1886 SPRUCE CREEK BLVD

City  
PORT ORANGEState  
FLZip Code  
32128-6780FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

793.10

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664491**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, EDWARD, S., MR.,**Mailing Address 112 MARWOOD RD  
APT 4237City  
CABOTState  
PAZip Code  
16023-2259FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1784.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662513**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

239.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1764 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662781**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASTRO, MABEL, , ,**

Mailing Address 4616 PRAIRIE POINT BOULEVARD

City  
KISSIMMEEState  
FLZip Code  
34746-6364FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

889.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662713**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATEER, RAYMOND, , ,**

Mailing Address 1278 MATEER RD

City  
KITTANNINGState  
PAZip Code  
16201-8024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

264.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662915**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1765 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAXWELL, TAYLOR, H., MR.,**

Mailing Address 9121 SOUTHMONT CV206

City  
FORT MYERSState  
FLZip Code  
33908-6308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.98

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663729**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAY, ANNE, , ,**

Mailing Address 8940 EDGEWOOD DR.

City  
GAITHERSBURGState  
MDZip Code  
20877-1544FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.35

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663895**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAY, ANNE, , ,**

Mailing Address 8940 EDGEWOOD DR.

City  
GAITHERSBURGState  
MDZip Code  
20877-1544FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.35

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663897**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

16.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1766 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAY, ANNE, , ,**

Mailing Address 8940 EDGEWOOD DR.

City  
GAITHERSBURGState  
MDZip Code  
20877-1544FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.35

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663901**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCASHLAN, TIMOTHY, , ,**

Mailing Address 4932 MORGANS CREEK COURT

City  
CARMELState  
INZip Code  
46033-8182FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EDWARD JONESOccupation (for Individual)  
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.09

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662589**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCKINNEY, SARA, , ,**

Mailing Address 808 RIVIERA AVE

City  
DAVENPORTState  
FLZip Code  
33897-6850FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

473.78

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662646**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1767 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCMICHAEL, RONDA, , ,**

Mailing Address 2 HERITAGE WAY

City  
OXFORDState  
ALZip Code  
36203-3942FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WISE ENVIROMENTALOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663286**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCPHEARSON, FORREST, , ,**

Mailing Address 71178 CLIPPER PL

City  
ABITA SPRINGSState  
LAZip Code  
70420-3466FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662659**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCPHERSON, JIMMY, , ,**

Mailing Address 5644S.DESERT LAKES DR

City  
FORT MOHAVEState  
AZZip Code  
86426-9298FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

553.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663134**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1768 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCPHERSON, JIMMY, , ,**

Mailing Address 5644S.DESERT LAKES DR

City  
FORT MOHAVEState  
AZZip Code  
86426-9298FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.88

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663320**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MERICLE, DANIEL, V., , SR.**

Mailing Address 11420 SAN JACINTO AVE NE

City  
ALBUQUERQUEState  
NMZip Code  
87112-5527FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.22

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664106**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEYERS-GLYDA, DONNA, , MS.,**

Mailing Address 7512 VALHALLA DRIVE

City  
MAUMEEState  
OHZip Code  
43537-9512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SERENITY REALTYOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.74

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664182**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

165.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1769 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEYERS-GLYDA, DONNA, , MS.,**

Mailing Address 7512 VALHALLA DRIVE

City  
MAUMEEState  
OHZip Code  
43537-9512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SERENITY REALTYOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.74

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664225**

Amount of Each Receipt this Period

5.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEYER, ROBERT, , ,**

Mailing Address 8330 VIA DEL SOL

City  
SCOTTSDALEState  
AZZip Code  
85255-4924FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PHOENIX CHILDREN'SOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.14

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662623**

Amount of Each Receipt this Period

281.07

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIANO, LUCILLE, , ,**

Mailing Address P.O.BOX 510315

City  
MELBOURNE BEACHState  
FLZip Code  
32951-0315FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

311.50

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662971**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

322.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1770 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, JAY, P., ,**

Mailing Address 9018 GOLDEN MOUNTAIN CIRCLE

City  
BOYNTON BEACHState  
FLZip Code  
33473-3311FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NEW YORK LIFE INS COOccupation (for Individual)  
REGISTERED REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664312**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662779**

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661872**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1771 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.16

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661878**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.16

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662952**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLS, WALTER, G., ,**

Mailing Address 2930 PORTO BELLO AVE

City  
LEESBURGState  
FLZip Code  
34748-8537FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.22

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664228**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1772 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MINNEMAN, GAIL, , MS.,**

Mailing Address 650 COUNTRY CLUB DR

City  
BATTLE CREEKState  
MIZip Code  
49015-3651FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTOMOBILE DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664325

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOCK, WILLIAM, , ,**

Mailing Address 923 6TH AVENUE

City  
ALBANYState  
GAZip Code  
31701-1742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663265

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOMARY, NED, , ,**

Mailing Address 3412 THE STRAND

City  
MANHATTAN BEACHState  
CAZip Code  
90266-3350FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662155

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.67



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1773 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTAGNE, GERARD, , ,**

Mailing Address 203 PIER E

City  
NAPLESState  
FLZip Code  
34112-8125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663665**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662173**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTGOMERY, ROBBIE, , ,**

Mailing Address 655 DOVER RD

City  
BENTONIAState  
MSZip Code  
39040-9024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662750**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1774 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOODY, JO, ANN, ,**

Mailing Address 507 POWER DR.

City  
DUNCANVILLEState  
TXZip Code  
75116-3721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.14

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663174

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOORE, BENTON, , ,**

Mailing Address 7810 N. RIDGELAND DR.

City  
INDIANAPOLISState  
INZip Code  
46250-2269FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663980

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOORMAN, FRANCES, S., MRS.,**

Mailing Address 11207 BUSHIRE DRIVE

City  
DALLASState  
TXZip Code  
75229-4106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.89

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27662881

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

91.19

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1775 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOORMAN, FRANCES, S., MRS.,

Mailing Address 11207 BUSHIRE DRIVE

City  
DALLASState  
TXZip Code  
75229-4106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663637

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOUAT, NANCY, M., MS.,

Mailing Address 29242 HIGHWAY 127

City  
GREEN RIDGEState  
MOZip Code  
65332-2303FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662511

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOUNTEER, FAYE, , ,

Mailing Address 9985N 5320 W

City  
HIGHLANDState  
UTZip Code  
84003-3501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

529.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661956

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

107.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1776 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOURAD, ANTHONY, , ,**Mailing Address 1355 S PORTOFINO DR.  
APT 101City  
SARASOTAState  
FLZip Code  
34242-3140FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663572**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MULAR, KATHLEEN, , ,**

Mailing Address 8215 BUNTON ROAD

City  
WILLISState  
MIZip Code  
48191-9501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PARKWAY SERVICES INCOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663363**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

955.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662102**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1777 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUSSLER, CYNTHIA, E., MISS,**

Mailing Address 14831 DOMART AVE

City  
NORWALKState  
CAZip Code  
90650-5303FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663991**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MYERS, LINDA, W., ,**

Mailing Address 11020 JUNIPER MESA ROAD

City  
LITTLE ROCKState  
CAZip Code  
93543-3600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663682**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NAHINU, BETH, , ,**

Mailing Address 1186 EAST 900 SOUTH

City  
ST GEORGEState  
UTZip Code  
84790-5437FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662296**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

224.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1778 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NAMORATO, MICHAEL, , ,**

Mailing Address 129 LAKEWAY DR.

City  
OXFORDState  
MSZip Code  
38655-9600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.35

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662692**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NARANG, PAUL, JOHN, MR.,**Mailing Address 8450 82ND STREET  
APT 110

City

PLEASANT PRAIRIE

State

WI

Zip Code

53158-2536

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DELOITTEOccupation (for Individual)  
INFORMATION TECHNOLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661957**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEEDLE, JACQUELINE, , MRS.,**Mailing Address 3747 PEACHTREE RD NE  
APT 519

City

ATLANTA

State

GA

Zip Code

30319-1329

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

548.74

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661570**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

203.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1779 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, KAREN, , ,**

Mailing Address 4304 COCHRAN CHAPEL CIRCLE

City  
DALLASState  
TXZip Code  
75209-2026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27664029

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, MIKE, G., ,**

Mailing Address 711 E 3230 N

City  
LEHIState  
UTZip Code  
84043-2910FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.42

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27661480

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

856.60

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663061

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1780 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663455**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEMEROFF, EILEEN, , ,**

Mailing Address 20 POND CROSSING

City  
SOUTHAMPTONState  
NYZip Code  
11968-4728FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1332.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663232**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEWELL, LINDA, , ,**

Mailing Address 4324 SUMMER STAR LANE

City  
FORT WORTHState  
TXZip Code  
76244-4934FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

574.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664031**

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.43



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1781 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NGUYEN, DICHSON, , ,**

Mailing Address 15300 MAGNOLIA ST. SPC.53

City  
WESTMINSTERState  
CAZip Code  
92683-6425FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662126**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIEMANN, NANCY, , ,**

Mailing Address 18 DOGWOOD RD.

City  
MORRIS PLAINSState  
NJZip Code  
07950-1919FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

853.83

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662375**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NIEMANN, NANCY, , ,**

Mailing Address 18 DOGWOOD RD.

City  
MORRIS PLAINSState  
NJZip Code  
07950-1919FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

853.83

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663857**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1782 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NIEVES, NANCY, , ,**

Mailing Address 130 GLEN BEIGH RUN

City  
TYRONEState  
GAZip Code  
30290-1873FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FCBOEOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661749

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIEVES, NANCY, , ,**

Mailing Address 130 GLEN BEIGH RUN

City  
TYRONEState  
GAZip Code  
30290-1873FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FCBOEOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661773

Amount of Each Receipt this Period

60.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O' BRIEN, CYNTHIA, , ,**

Mailing Address 15830 KNOLL LAKE DR.

City  
HOUSTONState  
TXZip Code  
77095-2640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

540.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662254

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

105.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1783 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O' BRIEN, CYNTHIA, , ,**

Mailing Address 15830 KNOLL LAKE DR.

City  
HOUSTON

State  
TX

Zip Code  
77095-2640

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.66

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27662259**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O' BRIEN, CYNTHIA, , ,**

Mailing Address 15830 KNOLL LAKE DR.

City  
HOUSTON

State  
TX

Zip Code  
77095-2640

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.66

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27662270**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O' CONNOR, EDWARD, R., ,**

Mailing Address 3849 BROAD ST

City  
PHIL CAMPBELL

State  
AL

Zip Code  
35581-3739

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27662436**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

145.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1784 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O'FLYNN, ARMINDA, , ,**

Mailing Address 12864 BISCAYNE BLVD

City  
N. MIAMIState  
FLZip Code  
33181-2007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

992.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663516

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O'FLYNN, ARMINDA, , ,**

Mailing Address 12864 BISCAYNE BLVD

City  
N. MIAMIState  
FLZip Code  
33181-2007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

992.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663518

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'FLYNN, ARMINDA, , ,**

Mailing Address 12864 BISCAYNE BLVD

City  
N. MIAMIState  
FLZip Code  
33181-2007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

992.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663524

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1785 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLNEY, LINDA, , ,**

Mailing Address PO BOX 194

City  
PRIDES CROSSINGState  
MAZip Code  
01965-0194FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664104**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, PATRICIA, , ,**

Mailing Address 243 OCEANO DRIVE

City  
LOS ANGELESState  
CAZip Code  
90049-4123FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662556**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ORD, GORDON, L., MR.,**

Mailing Address 228 CHARLESTOWNE PLACE DR.

City  
SAINT CHARLESState  
MOZip Code  
63301-4912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662655**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

331.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1786 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ORENDAIN, TOMAS, , MR.,**

Mailing Address 17190 CLUB HILL DR

City  
DALLASState  
TXZip Code  
75248-1104FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
OPTICAL % TELECOMM INCOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662385**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ORYALL, CORA, , MS.,**

Mailing Address 7414 PALM CT

City  
PLEASANTONState  
CAZip Code  
94588-4851FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661675**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662014**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1787 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OWENS, ROBERT, , ,**

Mailing Address 141 ALEXANDER PLACE

City  
WINTER PARKState  
FLZip Code  
32789-4417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMMERCIAL REAL ESTATE MANAGEMENTOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662728**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAINTER, GLORIA, , ,**

Mailing Address 2516 BARBADOS DRIVE

City  
GAUTIERState  
MSZip Code  
39553-6762FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662607**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PALMER, JEAN, B., MRS.,**

Mailing Address 224 ARNOLD AVE

City  
SYRACUSEState  
NYZip Code  
13210-3714FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.84

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661791**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1788 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALMER, LORETTA, , ,**

Mailing Address 1215 ANCHORS WAY DR. SPCE 140

City  
VENTURAState  
CAZip Code  
93001-0277FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.65

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663799**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARKER, BRUCE, E., ,**

Mailing Address 320 IVYWOOD LANE

City  
NAPLESState  
FLZip Code  
34112-7239FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664091**

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKERTON, STEPHEN, , ,**

Mailing Address 5169 W HIGHLAND DR.

City  
COEUR D ALENEState  
IDZip Code  
83814-9317FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.50

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662736**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.15



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1789 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARKERTON, STEPHEN, , ,**

Mailing Address 5169 W HIGHLAND DR.

City  
COEUR D ALENEState  
IDZip Code  
83814-9317FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662754**

Amount of Each Receipt this Period

208.20

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARRIERA, JEREMY, , ,**

Mailing Address 483 E WISER LAKE RD

City  
LYNDENState  
WAZip Code  
98264-9454FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AXIOM DIVISION 7Occupation (for Individual)  
ROOFING CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662496**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAULSON, KATHLEEN, , ,**

Mailing Address 7725 E SANDALWOOD

City  
SCOTTSDALEState  
AZZip Code  
85250-7732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662472**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

359.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1790 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.76

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661792**

Amount of Each Receipt this Period

1.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, EDWIN, , ,**

Mailing Address 2061 SE ACADEMY ST

City  
DALLASState  
ORZip Code  
97338-1965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.11

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661784**

Amount of Each Receipt this Period

9.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, EDWIN, , ,**

Mailing Address 2061 SE ACADEMY ST

City  
DALLASState  
ORZip Code  
97338-1965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.11

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661786**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1791 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, EDWIN, , ,**

Mailing Address 2061 SE ACADEMY ST

City  
DALLASState  
ORZip Code  
97338-1965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661796**

Amount of Each Receipt this Period

9.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PEARSON, CLAYTON, , ,**

Mailing Address 16110 JERALD RD

City  
LAURELState  
MDZip Code  
20707-2613FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BFPEOccupation (for Individual)  
FIRE ALARM TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664184**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PELTIER, LARRY, , MR.,**

Mailing Address 2432 E ALDEN ST

City  
SIMI VALLEYState  
CAZip Code  
93065-2308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664049**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1792 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PEREIRA, REGINALD, , ,**Mailing Address 10201 E BAY HARBOR DR.  
APT 503City  
BAY HARBOR ISLANDSState  
FLZip Code  
33154-1305FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PPSFOccupation (for Individual)  
MEDICAL DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.50

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664013**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETERS, JOHN, C., MR., JR.**

Mailing Address 211 NORTH BOSTON AVENUE

City  
N. MASSAPEQUAState  
NYZip Code  
11758-1544FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663643**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERSON, NORMA, , ,**

Mailing Address 1526 DEDHAM LANE

City  
SCHAUMBURGState  
ILZip Code  
60193-2527FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

211.44

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663422**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

399.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1793 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETERSON, NORMA, , ,**

Mailing Address 1526 DEDHAM LANE

City  
SCHAUMBURGState  
ILZip Code  
60193-2527FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.44

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663430**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETERSON, SHARON, , ,**

Mailing Address 3410 LONDON CT DR

City  
COLUMBUSState  
OHZip Code  
43221-1166FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.70

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662383**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORGState  
VAZip Code  
23860-8229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

388.35

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661527**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1794 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETRITZ, GEORGE, L., ,**

Mailing Address 4811 ROGERS ROAD

City  
BEULAHState  
MIZip Code  
49617-9562FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.84

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664024**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETRILENA, JAMES, , ,**

Mailing Address 19 HIGHLAND DR.

City  
MC KEES ROCKSState  
PAZip Code  
15136-1731FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CARPENTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662221**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.11

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662856**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1795 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663401

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663480

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661614

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1796 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661628**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PISTORINO, MARIA, , MS.,**

Mailing Address 6535 SW 123RD STREET

City  
PINECRESTState  
FLZip Code  
33156-5554FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

983.11

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663175**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PISTORINO, MARIA, , MS.,**

Mailing Address 6535 SW 123RD STREET

City  
PINECRESTState  
FLZip Code  
33156-5554FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

983.11

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663182**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1797 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PISTORINO, MARIA, , MS.,**

Mailing Address 6535 SW 123RD STREET

City  
PINECRESTState  
FLZip Code  
33156-5554FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

983.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	08	/	2025

**Transaction ID : SA11A.27663186**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PISTORINO, MARIA, , MS.,**

Mailing Address 6535 SW 123RD STREET

City  
PINECRESTState  
FLZip Code  
33156-5554FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

983.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	08	/	2025

**Transaction ID : SA11A.27663188**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PLACA, ALAN, , ,**

Mailing Address 200 EAGLETON ESTATE BLVD

City  
PALM BEACH GARDENSState  
FLZip Code  
33418-8411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIULIANI PARTNERS LLCOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

567.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	08	/	2025

**Transaction ID : SA11A.27664249**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1798 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PLENDERLEITH, GRACE, , ,**

Mailing Address 111 FALCON RIDGE DRIVE

City  
IRWINState  
PAZip Code  
15642-3094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.57

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664196**

Amount of Each Receipt this Period

0.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POELZING, DIETMAR, G., ,**

Mailing Address 1947 FORTSTONE LN

City  
COLUMBUSState  
OHZip Code  
43228-3876FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.23

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663491**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.88

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663608**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1799 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRATT, RANDY, , ,**

Mailing Address 725 OKEMOS ROAD

City  
MASONState  
MIZip Code  
48854-9333FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662189**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRICE, JENNIE, , ,**

Mailing Address 9949 N CROOK LN

City  
TUCSONState  
AZZip Code  
85742-8653FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663244**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRINDLE, GLEN, , ,**

Mailing Address 942 DISCOVERY CIR NE

City  
ISSAQUAHState  
WAZip Code  
98029-6203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPUOccupation (for Individual)  
FACILITY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661545**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1800 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PUERTA, AMANDA, , ,**

Mailing Address 10 GLENBROOK RD

City  
STAMFORDState  
CTZip Code  
06902-2977FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662094

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PUERTA, AMANDA, , ,**

Mailing Address 10 GLENBROOK RD

City  
STAMFORDState  
CTZip Code  
06902-2977FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662553

Amount of Each Receipt this Period

0.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PUERTA, AMANDA, , ,**

Mailing Address 10 GLENBROOK RD

City  
STAMFORDState  
CTZip Code  
06902-2977FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

559.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663053

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

59.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1801 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PUERTA, AMANDA, , ,**

Mailing Address 10 GLENBROOK RD

City  
STAMFORDState  
CTZip Code  
06902-2977FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663906

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PUERTA, AMANDA, , ,**

Mailing Address 10 GLENBROOK RD

City  
STAMFORDState  
CTZip Code  
06902-2977FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664037

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PUERTA, AMANDA, , ,**

Mailing Address 10 GLENBROOK RD

City  
STAMFORDState  
CTZip Code  
06902-2977FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

559.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664498

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1802 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAINEY, DAVID, L., MR.,**

Mailing Address 1791 RAMPART DR.

City  
ALEXANDRIAState  
VAZip Code  
22308-1655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.78

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663551**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAINWATER, DAVID, , ,**

Mailing Address 109 EAST 14TH AVE

City  
CORDELEState  
GAZip Code  
31015-1446FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.98

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664006**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAINWATER, DAVID, , ,**

Mailing Address 109 EAST 14TH AVE

City  
CORDELEState  
GAZip Code  
31015-1446FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.98

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664010**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1803 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAINWATER, DAVID, , ,**

Mailing Address 109 EAST 14TH AVE

City  
CORDELEState  
GAZip Code  
31015-1446FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664015

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAMIREZ, MARY, R., ,**

Mailing Address 5107 ENCANTA ST

City  
SAN ANTONIOState  
TXZip Code  
78233-5919FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.17

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661674

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUSCH, BARBARA, , MS.,**

Mailing Address 7211 N VIA DE PAESIA

City  
SCOTTSDALEState  
AZZip Code  
85258-3739FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663894

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

188.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1804 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAVENSCROFT, ROBERT, , ,**

Mailing Address 8445 E HARTFORD DR.

City  
SCOTTSDALEState  
AZZip Code  
85255-5450FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.16

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664502**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAYBORN, KENNETH, , ,**

Mailing Address 507 KYLE LANE NW

City  
CLEVELANDState  
TNZip Code  
37312-6439FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1059.67

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662291**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RECORD, STEVE, , ,**Mailing Address 607 HIGHWAY 340  
#19City  
FRUITAState  
COZip Code  
81521-9520FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STEVE RECORDOccupation (for Individual)  
OIL GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662699**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

215.54



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1805 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RECORD, STEVE, , ,**Mailing Address 607 HIGHWAY 340  
#19City  
FRUITAState  
COZip Code  
81521-9520FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEVE RECORDOccupation (for Individual)  
OIL GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663042

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REEDY, MARY, A., MS.,**

Mailing Address 213 WOODSIDE DR

City

CHILHOWIE

State

VA

Zip Code

24319-5896

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662810

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REEDY, MARY, A., MS.,**

Mailing Address 213 WOODSIDE DR

City

CHILHOWIE

State

VA

Zip Code

24319-5896

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

460.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663692

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

149.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1806 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REESON, EVELYN, , ,**

Mailing Address 439 GRAND DRIVE

City  
BIGFORKState  
MTZip Code  
59911-3614FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.50

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662158**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REEVES, LESLEY, , ,**

Mailing Address 278 E PAUL DR.

City  
PAYSONState  
AZZip Code  
85541-2445FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661611**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REEVES, LESLEY, , ,**

Mailing Address 278 E PAUL DR.

City  
PAYSONState  
AZZip Code  
85541-2445FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661718**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

134.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1807 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REISS, CLAIRE, K., MRS.,**Mailing Address 464 PROSPECT STREET  
UNIT 501City  
LA JOLLAState  
CAZip Code  
92037-4742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1431.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662899**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REIZOVIC, ROY, , ,**

Mailing Address 8520 SUTTERFIELD DRIVE

City

COLORADO SPRINGS

State  
COZip Code  
80920-6204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663475**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REIZOVIC, ROY, , ,**

Mailing Address 8520 SUTTERFIELD DRIVE

City

COLORADO SPRINGS

State  
COZip Code  
80920-6204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664533**

Amount of Each Receipt this Period

2.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

89.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1808 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REYES, CATALINO, A., MR.,**

Mailing Address 1808 N KENMORE AVE

City  
LOS ANGELESState  
CAZip Code  
90027-4008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664203**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REYES, CATALINO, A., MR.,**

Mailing Address 1808 N KENMORE AVE

City  
LOS ANGELESState  
CAZip Code  
90027-4008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664212**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661694**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1809 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661698

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662662

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664118

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1810 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664123

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664125

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664127

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1811 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664130

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664135

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIHANI, KATHY, , ,**

Mailing Address 19001 SEARSTONE DR APT 251

City  
CARYState  
NCZip Code  
27513-5432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663680

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1812 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RITCHEY, GREG, , ,**

Mailing Address 5333 53 STREET N

City  
SAINT PETERSBURGState  
FLZip Code  
33709-3735FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
USPSOccupation (for Individual)  
LETTER CARRIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.08

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661591**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RITCHEY, GREG, , ,**

Mailing Address 5333 53 STREET N

City  
SAINT PETERSBURGState  
FLZip Code  
33709-3735FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
USPSOccupation (for Individual)  
LETTER CARRIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.08

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661609**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RITCHEY, GREG, , ,**

Mailing Address 5333 53 STREET N

City  
SAINT PETERSBURGState  
FLZip Code  
33709-3735FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
USPSOccupation (for Individual)  
LETTER CARRIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.08

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661612**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4.11



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1813 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RITCHEY, GREG, , ,**

Mailing Address 5333 53 STREET N

City  
SAINT PETERSBURGState  
FLZip Code  
33709-3735FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPSOccupation (for Individual)  
LETTER CARRIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661615**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RITCHEY, GREG, , ,**

Mailing Address 5333 53 STREET N

City  
SAINT PETERSBURGState  
FLZip Code  
33709-3735FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPSOccupation (for Individual)  
LETTER CARRIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661617**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RITCHIE, PATTI, , ,**Mailing Address 3000 MOUNT HOPE RD  
LOT 6City  
GRASS LAKEState  
MIZip Code  
49240-8905FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

369.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664110**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1814 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, DALE, , ,**

Mailing Address 104 BRANNON LANE

City  
TROYState  
ALZip Code  
36079-8203FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.71

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662388**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, JEFF, , ,**

Mailing Address 3416 PRAIRIE GRASS ROAD

City  
OKLAHOMA CITYState  
OKZip Code  
73120-5607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.69

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662007**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, JEFF, , ,**

Mailing Address 3416 PRAIRIE GRASS ROAD

City  
OKLAHOMA CITYState  
OKZip Code  
73120-5607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.69

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662022**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1815 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODRIGUE, MERRY, , MS.,**

Mailing Address 307 WOODWAY DR

City  
HOUMAState  
LAZip Code  
70363-3846FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661945**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROESBERY, ROBERT, , ,**Mailing Address 272 PARKWAY AVE  
APT 3City  
CINCINNATIState  
OHZip Code  
45216-1476FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.75

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662339**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROHOSKY, ROBERT, , ,**

Mailing Address 3739 HONEYCOMB DR

City  
CONYERSState  
GAZip Code  
30094-3662FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

515.40

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663776**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

414.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1816 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROHRIG, SHELLEY, J., ,**

Mailing Address 49 MASER AVENUE

City  
WHEELINGState  
WVZip Code  
26003-7246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.80

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662949**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROTH, MARTHA, P., ,**

Mailing Address 7370 APPLERIDGE CT

City  
CINCINNATIState  
OHZip Code  
45247-5031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRIHEALTHOccupation (for Individual)  
R.N.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.52

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662529**

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661797**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

28.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1817 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662057

Amount of Each Receipt this Period

1.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662538

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662783

Amount of Each Receipt this Period

2.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1818 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662909

Amount of Each Receipt this Period

0.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663482

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663521

Amount of Each Receipt this Period

2.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1819 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663905**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662019**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUGGIERI, THOMAS, , MR.,**

Mailing Address 115 HAWTHORNE LN

City  
PHOENIXVILLEState  
PAZip Code  
19460-2731FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662271**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

93.15

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1820 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RUSIN-SMALLEY, DEBORAH, A., ,

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVERState  
NJZip Code  
08882-1908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663825

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUSSELL, STEPHANIE, O., MS.,

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661975

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUSSI, FREDERICK, , ,

Mailing Address 1041 EL MIRADOR DRIVE

City  
FULLERTONState  
CAZip Code  
92835-1912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FRPEPES RESTAURANTS INC.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662403

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

63.09



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1821 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUTHER, PATRICIA, M., ,**

Mailing Address 300 CHURCH ST

City  
MATAWANState  
NJZip Code  
07747-1522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663561**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RYAN, KEVIN, M., MR.,**

Mailing Address 317 SIDLEY ROAD

City  
MALVERNState  
PAZip Code  
19355-1132FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663282**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RYAN, LARRY, , ,**

Mailing Address 18 CINDER COURT

City  
SACRAMENTOState  
CAZip Code  
95831-2738FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664555**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1822 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RYDZESKI, TOM, , ,**

Mailing Address 22562 MARYLHURST CT

City  
LAKE FORESTState  
CAZip Code  
92630-5033FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.05

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661789**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SALVINO, VICTOR, EMANUEL, ,**

Mailing Address P.O. BOX 560747

City  
DALLASState  
TXZip Code  
75356-0747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2155.16

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663407**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SALVINO, VICTOR, EMANUEL, ,**

Mailing Address P.O. BOX 560747

City  
DALLASState  
TXZip Code  
75356-0747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2155.16

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664501**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

227.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1823 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANCHEZ, JOSE, , ,**

Mailing Address 10606 WAYNE AVENUE

City  
LUBBOCKState  
TXZip Code  
79424-7417FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
XFABOccupation (for Individual)  
MFG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662729

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662277

Amount of Each Receipt this Period

1.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANDERS, MELVIN, , ,**

Mailing Address 4039 MAYFLOWER CT SW

City  
LILBURNState  
GAZip Code  
30047-3206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27661604

Amount of Each Receipt this Period

14.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1824 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANFORD, MARCELLA, FRANCIS, MS.,**

Mailing Address 12593 CANBY AVE

City  
FARIBAULTState  
MNZip Code  
55021-7254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.88

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661574**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANTORO, NANCY, , ,**

Mailing Address P.O. BOX 2095

City  
RANCHO SANTA FEState  
CAZip Code  
92067-2095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1476.08

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662984**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANTORO, NANCY, , ,**

Mailing Address P.O. BOX 2095

City  
RANCHO SANTA FEState  
CAZip Code  
92067-2095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1476.08

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663730**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1825 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAVAGE, JAMES, , ,**

Mailing Address 2530 59 WINDWARD LAKES AVE.

City  
ORANGE BEACHState  
ALZip Code  
36561-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662733

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCARLETT, KENNETH, , ,**

Mailing Address 17114 PARK LODGE DR.

City  
SPRINGState  
TXZip Code  
77379-4493FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662268

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHAAB, JANICE, , ,**

Mailing Address 560 WOODINGTON DRIVE

City  
LANCASTERState  
CAZip Code  
93535-3808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

588.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662550

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

124.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1826 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHILDWACHTER, FRED, , ,**

Mailing Address 34 MAPLEWOOD DR

City  
DANBURYState  
CTZip Code  
06811-4211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662805**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHLAGETER, FRANK, , MR.,**

Mailing Address 4420 N.E. 28TH AVENUE

City  
POMPANO BEACHState  
FLZip Code  
33064-7222FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663135**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLEIFFARTH, KAREN, , MS.,**

Mailing Address 1232 DUTCH FIELDS PKWY

City  
MIDWAYState  
UTZip Code  
84049-6931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662470**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1827 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLEIFFARTH, KAREN, , MS.,**

Mailing Address 1232 DUTCH FIELDS PKWY

City  
MIDWAYState  
UTZip Code  
84049-6931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.17

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662645**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHMIEDERER, BEVERLY, , ,**

Mailing Address 8937 ISLAND VIEW DR.

City  
POLK CITYState  
FLZip Code  
33868-9654FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664319**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHMIEDERER, BEVERLY, , ,**

Mailing Address 8937 ISLAND VIEW DR.

City  
POLK CITYState  
FLZip Code  
33868-9654FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

243.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664322**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1828 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHNAIDT, LORAN, , ,**

Mailing Address 10744 FOREST PATH DRIVE

City  
SAINT LOUISState  
MOZip Code  
63128-2009FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.22

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662501**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHNAIDT, LORAN, , ,**

Mailing Address 10744 FOREST PATH DRIVE

City  
SAINT LOUISState  
MOZip Code  
63128-2009FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.22

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662522**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHOENHALS, RICHARD, , ,**

Mailing Address P.O. BOX 2075

City  
WEATHERFORDState  
OKZip Code  
73096-8075FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROSSPOINTE CHURCHOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

715.35

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664084**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.49



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1829 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHOENHALS, RICHARD, , ,**

Mailing Address P.O. BOX 2075

City  
WEATHERFORDState  
OKZip Code  
73096-8075FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROSSPOINTE CHURCHOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664087**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHOENHALS, RICHARD, , ,**

Mailing Address P.O. BOX 2075

City  
WEATHERFORDState  
OKZip Code  
73096-8075FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROSSPOINTE CHURCHOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664096**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHRUM, VALERIE, , ,**

Mailing Address 8654 WEDGEWOOD LN N

City  
MAPLE GROVEState  
MNZip Code  
55369-4615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

399.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663693**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.46

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1830 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHWENZER, JOHN, , MR.,**

Mailing Address **4465 LAKEVIEW GLEN DR.**

City  
**MEDINA**

State  
**OH**

Zip Code  
**44256-6510**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**281.58**

Date of Receipt

**02 / 08 / 2025**

**Transaction ID : SA11A.27661993**

Amount of Each Receipt this Period

**0.25**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCISSOM, TOMMY, , MR.,**

Mailing Address **656 DORIS AVE**  
**#B**

City  
**OXNARD**

State  
**CA**

Zip Code  
**93030-4637**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**404.10**

Date of Receipt

**02 / 08 / 2025**

**Transaction ID : SA11A.27664497**

Amount of Each Receipt this Period

**52.05**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address **9778 SW COQUILLE CT**

City  
**TUALATIN**

State  
**OR**

Zip Code  
**97062-9528**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**474.64**

Date of Receipt

**02 / 08 / 2025**

**Transaction ID : SA11A.27661912**

Amount of Each Receipt this Period

**1.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**53.30**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 1831 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27661913

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27661914

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27661915

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.99

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1832 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATIN

State  
OR

Zip Code  
97062-9528

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

**02** / **08** / **2025**

**Transaction ID : SA11A.27661918**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATIN

State  
OR

Zip Code  
97062-9528

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

**02** / **08** / **2025**

**Transaction ID : SA11A.27662846**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEIBERT, ANNE MARIE, , ,**

Mailing Address 7840 BOSTON STATE ROAD

City  
HAMBURG

State  
NY

Zip Code  
14075-7349

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.50

Date of Receipt

**02** / **08** / **2025**

**Transaction ID : SA11A.27664363**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

39.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1833 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEXTON, STEPHEN, M., MR.,**

Mailing Address 2728 IRON CT

City  
FREMONTState  
NEZip Code  
68025-6167FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662599**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHERROD, CLIFFORD, , ,**

Mailing Address 28900 SOUTH SONCY ROAD

City  
CANYONState  
TXZip Code  
79015-6420FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662505**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661673**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1834 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIMONS, CANDY, , ,**

Mailing Address 426 HOFFMAN RD

City  
BASTROPState  
TXZip Code  
78602-2670FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663201

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663708

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

406.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663710

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1835 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663711

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663712

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

406.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663715

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1836 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663716

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663721

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLENState  
CAZip Code  
92321-1244FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

406.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663725

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.31



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1837 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINANDER, MARGO, W., ,**

Mailing Address P.O. BOX 1244

City  
CEDAR GLEN

State  
CA

Zip Code  
92321-1244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.80

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27663740**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, CYNTHIA, , ,**

Mailing Address 38793 SW FERNWOOD DR.

City  
GASTON

State  
OR

Zip Code  
97119-8584

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27663164**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, DENNIS, , ,**

Mailing Address 34073 EAST 740 ROAD

City  
WAGONER

State  
OK

Zip Code  
74467-9433

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

515.08

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27663194**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

166.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1838 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, MARY, L., ,**

Mailing Address 2939 QUENLEY ST

City  
SAINT CHARLESState  
MOZip Code  
63301-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663529**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, NEAL, , ,**

Mailing Address 45 OLD COTTAGE BEACH DRIVE

City  
ROCKPORTState  
TXZip Code  
78382-7769FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WELLS FARGOOccupation (for Individual)  
SEMI RETIRED FULL TIME TELLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663063**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, RON, , ,**

Mailing Address P.O. BOX 898

City  
BANNER ELKState  
NCZip Code  
28604-0898FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1028.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661483**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

253.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1839 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662410**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SNYDER, ROBERT, A., MR.,**Mailing Address 5 OLD POST RD 3  
LOT 14City  
MILLERTONState  
NYZip Code  
12546-4969FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BOOK SELLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662896**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662572**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1840 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661653**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPALLONE, ARLENE, , ,**

Mailing Address 5925 BRAE BURN CIR

City  
VERO BEACHState  
FLZip Code  
32967-5277FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.16

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664336**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STALNAKER, BEN, , DR.,**

Mailing Address 10424 TAM O SHANTER RD

City  
PENSACOLAState  
FLZip Code  
32514-8305FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.75

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664095**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1841 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEES, LAURA, , ,**

Mailing Address 3509 HOUCKS MILL RD.

City  
MONKTONState  
MDZip Code  
21111-1703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.60

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27662652

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEES, LAURA, , ,**

Mailing Address 3509 HOUCKS MILL RD.

City  
MONKTONState  
MDZip Code  
21111-1703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.60

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27662686

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27662724

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1842 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663775**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STILLWELL, KAREN, , ,**

Mailing Address 59501 414TH LANE

City  
NEW ULMState  
MNZip Code  
56073-4220FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.13

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664245**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STONE, RODNEY, , ,**

Mailing Address 8530 VENICE BOULEVARD

City  
LOS ANGELESState  
CAZip Code  
90034-2549FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENVOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662204**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1843 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STORMENT, JOHN, B., MR.,**Mailing Address 6202 E MCKELLIPS RD  
UNIT 224City  
MESAState  
AZZip Code  
85215-2876FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.75

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662712**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STREET, PATRICIA, , ,**

Mailing Address 3804 AURORA CT.

City  
HALTOM CITYState  
TXZip Code  
76117-2708FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.46

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663279**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STUBBLEFIELD, DOTTIE, , ,**

Mailing Address 1265 CHARTRES

City  
KAUFMANState  
TXZip Code  
75142-4473FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

328.98

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663165**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1844 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STURTEVANT, STEPHANIE, , ,**

Mailing Address 11 PRICE DRIVE

City  
TROYState  
ILZip Code  
62294-3221FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NGAOccupation (for Individual)  
DOD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.30

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664218**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUDOL, JEAN, , ,**

Mailing Address 2640 GATELY DRIVE WEST

City

WEST PALM BEACH

State

FL

Zip Code

33415-7996

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.79

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662041**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUDOL, JEAN, , ,**

Mailing Address 2640 GATELY DRIVE WEST

City

WEST PALM BEACH

State

FL

Zip Code

33415-7996

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.79

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662507**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.82



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1845 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUMNET, JASPER, , ,**

Mailing Address 825 KENTUCKY STREET

City  
GRAHAMState  
TXZip Code  
76450-3512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662034

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SZALOCZI, IRENE, , ,**

Mailing Address 27 GRACE ST

City  
FORDSState  
NJZip Code  
08863-2101FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663390

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SZALOCZI, IRENE, , ,**

Mailing Address 27 GRACE ST

City  
FORDSState  
NJZip Code  
08863-2101FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

279.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664343

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

119.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1846 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TABIB, GABRIEL, , ,**

Mailing Address 9819 E ROADRUNNER DR.

City  
SCOTTSDALEState  
AZZip Code  
85262-1435FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
EXPORTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661592**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TARR, ANNE, , ,**

Mailing Address 13306 SOUTHWALK

City  
SAN ANTONIOState  
TXZip Code  
78232-4843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

987.25

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664054**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULAState  
MTZip Code  
59804-5849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

562.60

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663260**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1847 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, LYNNA, , ,**

Mailing Address 10305 N. GOLDEN OAK LN

City  
HIGHLANDState  
UTZip Code  
84003-9441FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662415

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, PHILIP, E., DR.,**

Mailing Address 3200 NANCY JEAN RD

City  
GREENSBOROState  
NCZip Code  
27406-9635FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHILIP E TAYLOR, DDSOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664064

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THEVANAYAGAM, SAM, , ,**

Mailing Address 30 TWOSOME DRIVE

City  
MOORESTOWNState  
NJZip Code  
08057-1370FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PARTS LIFE INCOccupation (for Individual)  
PRESIDENT CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664140

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1848 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THIELEN, THEO, , ,**

Mailing Address 509 8TH ST W

City  
PARK RAPIDSState  
MNZip Code  
56470-1375FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THIELEN MOTORS INC.Occupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.87

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663167**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, BONNIE, , ,**

Mailing Address 115 HOLBROOK DR.

City  
HUNTSVILLEState  
ALZip Code  
35806-4084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662418**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TJADEN, PAUL, W., MR.,**

Mailing Address 9935, W GOOD HOPE RD

City  
MILWAUKEEState  
WIZip Code  
53224-3813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

243.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662638**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

134.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1849 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRAN, TUAN, , ,**

Mailing Address 9041 GREENVILL AVE.

City  
WESTMINSTERState  
CAZip Code  
92683-5514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IHSSOccupation (for Individual)  
PRAYER; WORKER; WRITER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664074**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662533**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663664**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

69.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1850 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TROYER, DENNIS, , ,**

Mailing Address 2192 GLEN COVE WAY

City  
HIGH POINTState  
NCZip Code  
27265-9445FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.75

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661725**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRUEX, RAYMOND, , ,**

Mailing Address 312 CHARLESTON LN.

City  
READINGState  
PAZip Code  
19610-1802FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.30

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661925**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRUSLER, LAURA, , ,**

Mailing Address 1 HILLVIEW COURT

City  
CORTLANDT MANORState  
NYZip Code  
10567-6411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HENDRICK HUDSON SCHOOL DISTRICTOccupation (for Individual)  
MONITOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

237.17

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663261**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1851 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TUMLINSON, RICHARD, , ,**

Mailing Address P.O. BOX 3817

City  
ENGLEWOODState  
COZip Code  
80155-3817FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663356**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663103**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TYPER, DONALD, R., MR.,**

Mailing Address 410 N WEAVER ST

City  
HESSTONState  
KSZip Code  
67062-9041FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLC REALESTATE SERVICESOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

335.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662797**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1852 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ULZHEIMER, BOB, , ,**

Mailing Address 4011 GUNNIN ROAD

City  
NORCROSSState  
GAZip Code  
30092-1949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.93

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662046**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. UNDERWOOD, BARBARA, , ,**

Mailing Address 700 CRESTVIEW DRIVE

City  
WOOD RIVERState  
ILZip Code  
62095-3378FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.76

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661488**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. URREIZTIETA, IREL, , ,**

Mailing Address 180 KODIAK ST

City  
MORRO BAYState  
CAZip Code  
93442-3016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

477.55

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661810**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.94



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1853 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VANDYKE, BOBBIE, J., ,**

Mailing Address 201 ELLIOTT ROAD

City  
MARY ESTHER

State  
FL

Zip Code  
32569-1655

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.07

Date of Receipt

**02** / **08** / **2025**

**Transaction ID : SA11A.27662575**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VELDHUIZEN, DAVID, , ,**

Mailing Address 5350 E DEER VALLEY UNIT 2408

City  
PHOENIX

State  
AZ

Zip Code  
85054-4158

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

**02** / **08** / **2025**

**Transaction ID : SA11A.27662557**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VENNUM, PAULINE, , ,**

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDO

State  
FL

Zip Code  
32801-4360

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

675.43

Date of Receipt

**02** / **08** / **2025**

**Transaction ID : SA11A.27661929**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

217.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1854 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VENNUM, PAULINE, , ,**

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDOState  
FLZip Code  
32801-4360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.43

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661932**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VICKERS, OWEN, , ,**

Mailing Address P.O. BOX 1596

City  
BIRMINGHAMState  
ALZip Code  
35201-1596FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BHT RESOURCESOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663880**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VILLABONA, MARTHA, , ,**

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMIState  
FLZip Code  
33143-8048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662613**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.75

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1855 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VILLABONA, MARTHA, , ,**

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMI

State  
FL

Zip Code  
33143-8048

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27662615**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VILLABONA, MARTHA, , ,**

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMI

State  
FL

Zip Code  
33143-8048

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27662622**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VILLABONA, MARTHA, , ,**

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMI

State  
FL

Zip Code  
33143-8048

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

**Transaction ID : SA11A.27664468**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

116.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1856 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VILLABONA, MARTHA, , ,**

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMIState  
FLZip Code  
33143-8048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664469**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VILLABONA, MARTHA, , ,**

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMIState  
FLZip Code  
33143-8048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664470**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VILLABONA, MARTHA, , ,**

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMIState  
FLZip Code  
33143-8048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664471**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1857 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VILLABONA, MARTHA, , ,**

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMIState  
FLZip Code  
33143-8048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664473

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VINES, WALTER, , MR.,**

Mailing Address 174 MORRISON AVENUE

City  
STATEN ISLANDState  
NYZip Code  
10310-2835FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FDNYOccupation (for Individual)  
FIRE DEPARTMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662013

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VINING, SARA, , ,**Mailing Address 2825 CARTER RD  
UNIT 117City  
SUMTERState  
SCZip Code  
29150-1733FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664240

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1858 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VITALI, SONYA, , ,**

Mailing Address 9888 EAST LEGEND COURT

City  
GOLD CANYONState  
AZZip Code  
85118-5891FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663860**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661722**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27661788**

Amount of Each Receipt this Period

1.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1859 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664300**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664316**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALKER, LUCINDA, , ,**

Mailing Address 67 IRVING AVENUE, P.O. BOX 507

City  
HYANNIS PORTState  
MAZip Code  
02647-0507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

610.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662293**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1860 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALKINGTON, PAT, , ,**

Mailing Address 11765 N 135TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-3633FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662813

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKINGTON, PAT, , ,**

Mailing Address 11765 N 135TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-3633FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27663621

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WARD, ARTHUR, N., ,**

Mailing Address 4005 NE 160TH ST

City  
LAKE FOREST PARKState  
WAZip Code  
98155-6731FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662988

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

66.64



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1861 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WARFIELD, DONNA, , ,**

Mailing Address 29 DOWNSHIRE LANE

City  
DECATURState  
GAZip Code  
30033-1415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.09

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663722**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATTS SOQUET, L., ANITA, MS.,**

Mailing Address 4155 TUDOR CENTRE DRIVE, SUITE 208

City  
ANCHORAGEState  
AKZip Code  
99508-5912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.38

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661514**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEATHERLY, CINDI, , ,**

Mailing Address 4690 MEADOW SPRINGS DRIVE

City  
WATKINSVILLEState  
GAZip Code  
30677-4642FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

394.16

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664326**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1862 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEIDNER GOLDSTEIN, JEAN, , ,**

Mailing Address 990 BOULEVARD OF THE ARTS

City  
SARASOTAState  
FLZip Code  
34236-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662370**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEISS, NATHAN, , ,**

Mailing Address 19443 WATERS CURVE WAY

City  
BOCA RATONState  
FLZip Code  
33434-5118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662020**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELLS, KESSA, , ,**

Mailing Address 686 LISMORE LANE

City  
NAPLESState  
FLZip Code  
34108-8562FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

548.10

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27663055**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1863 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHEELER, EILEEN, , ,**

Mailing Address IN176 PAPWORTH

City  
CAROL STREAMState  
ILZip Code  
60188-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27662649

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHEELER, EILEEN, , ,**

Mailing Address IN176 PAPWORTH

City  
CAROL STREAMState  
ILZip Code  
60188-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664305

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHEELER, EILEEN, , ,**

Mailing Address IN176 PAPWORTH

City  
CAROL STREAMState  
ILZip Code  
60188-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

342.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025

Transaction ID : SA11A.27664307

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

77.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1864 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHEELER, EILEEN, , ,**

Mailing Address IN176 PAPWORTH

City  
CAROL STREAMState  
ILZip Code  
60188-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664308**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHEELER, EILEEN, , ,**

Mailing Address IN176 PAPWORTH

City  
CAROL STREAMState  
ILZip Code  
60188-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664313**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

371.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664167**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1865 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.31

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664169**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.31

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664172**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

371.31

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664173**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

26.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1866 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.31

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27664175

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.31

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27664177

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMS, CAROL, W., ,**

Mailing Address 112 LAKE POINT DR.

City  
CLAYTONState  
NCZip Code  
27527-5218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.22

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025

Transaction ID : SA11A.27663305

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1867 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMSON, NANCY, , ,**

Mailing Address 19024 HORNSBY LANE

City  
SPICEWOODState  
TXZip Code  
78669-6955FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662974**

Amount of Each Receipt this Period

120.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINGFIELD, REBECCA, C., MRS.,**

Mailing Address 11800 CYPRESS RD

City  
DIXONState  
MOZip Code  
65459-7212FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663184**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINTERS, KENNETH, C., MR.,**

Mailing Address 29840 THUNDERPAW DR

City  
HARVESTState  
ALZip Code  
35749-6523FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

376.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663639**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1868 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOLF, WALTER, W., MR.,**

Mailing Address 1813 VIEWCREST LANE

City  
SPOKANE VALLEYState  
WAZip Code  
99212-3216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27661575**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOOD, DARLENE, , ,**

Mailing Address 38207 N ARMADILLO DR, LAREDO RANCH

City  
SAN TAN VALLEYState  
AZZip Code  
85140-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

852.83

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664530**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOOD, LOCKETT, E., MR.,**

Mailing Address 21 S SUNSET ST

City  
LONGMONTState  
COZip Code  
80501-5843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AVIVID WATER TECHNOLOGYOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

301.92

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27664001**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.08



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1869 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODWARD, DEBORAH, , ,**

Mailing Address 91 NOVATAN RD S

City  
MOBILEState  
ALZip Code  
36608-9164FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662089**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOOTTEN, RIKE, , ,**Mailing Address 2100 S JOSEPHINE ST  
UNIT 4106City  
DENVERState  
COZip Code  
80210-4852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663289**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, CAROLYN, , ,**

Mailing Address 30 LISA AVE

City  
POPLAR BLUFFState  
MOZip Code  
63901-9094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27662672**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1870 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, KARRIE, , MS.,**Mailing Address **14 EAST 75TH STREET**  
**APARTMENT 7E**City  
**NEW YORK**State  
**NY**Zip Code  
**10021-2625**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**304.10**

Date of Receipt

**02 / 08 / 2025****Transaction ID : SA11A.27662336**

Amount of Each Receipt this Period

**100.00**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WYNIA, WILMA, , ,**Mailing Address **1065 LOMITA BLVD SPC 429**City  
**HARBOR CITY**State  
**CA**Zip Code  
**90710-5079**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**Occupation (for Individual)  
**INFORMATION REQUESTED PER BE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**225.46**

Date of Receipt

**02 / 08 / 2025****Transaction ID : SA11A.27664525**

Amount of Each Receipt this Period

**78.08**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YALE, ALAN, R., MR.,**Mailing Address **1418 N LAKE SHORE DR. APT. 20**City  
**CHICAGO**State  
**IL**Zip Code  
**60610-1687**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**286.28**

Date of Receipt

**02 / 08 / 2025****Transaction ID : SA11A.27662958**

Amount of Each Receipt this Period

**104.10**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►**282.18**

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1871 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROE

State  
TX

Zip Code  
77304-4430

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

**Transaction ID : SA11A.27662146**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROE

State  
TX

Zip Code  
77304-4430

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

**Transaction ID : SA11A.27663909**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YURRITA, LEZLIE, , ,**

Mailing Address PO BOX 207

City  
BANDERA

State  
TX

Zip Code  
78003-0207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

213.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2025

**Transaction ID : SA11A.27663060**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

205.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1872 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZAJIC, DWAYNE, , ,**

Mailing Address 2459 FRUITRIDGE ROAD

City  
SACRAMENTOState  
CAZip Code  
95822-2243FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663700**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZAPERACH, TERRY, , ,**

Mailing Address 746 LANTANA ST.

City  
COCOAState  
FLZip Code  
32926-5246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27663821**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZAPERACH, TERRY, , ,**

Mailing Address 746 LANTANA ST.

City  
COCOAState  
FLZip Code  
32926-5246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2025**Transaction ID : SA11A.27664385**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1873 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZGORSKI, DAWN, , ,**

Mailing Address 1723 BRODBECK ROAD

City  
HAMPSTEADState  
MDZip Code  
21074-1541FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.03

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA11A.27662919**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11C.27664591**

Amount of Each Receipt this Period

79426.50

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.32

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665841**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1874 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADAIR, STEFAN, , DR.,**

Mailing Address 8591 SKYLINE DR.

City  
LOS ANGELESState  
CAZip Code  
90046-1042FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665226**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665043**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADKINS, MARY, , ,**

Mailing Address 416 SW 725TH RD

City  
CHILHOWEEState  
MOZip Code  
64733-9229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

796.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666388**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1875 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADKINS, MARY, , ,**

Mailing Address 416 SW 725TH RD

City  
CHILHOWEEState  
MOZip Code  
64733-9229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667293**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADKINS, MARY, , ,**

Mailing Address 416 SW 725TH RD

City  
CHILHOWEEState  
MOZip Code  
64733-9229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667383**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADUANA, VEN, , ,**

Mailing Address 29 POLO DRIVE

City  
SOUTH BARRINGTONState  
ILZip Code  
60010-7110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ALLIANCE PATHOLOGY CONSULTANTSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

468.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666359**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1876 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADUANA, VEN, , ,**

Mailing Address 29 POLO DRIVE

City  
SOUTH BARRINGTONState  
ILZip Code  
60010-7110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ALLIANCE PATHOLOGY CONSULTANTSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667226**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AHLBUM, JONATHAN, , MR.,**

Mailing Address 660 NORTHWEST 42ND AVENUE

City  
COCONUT CREEKState  
FLZip Code  
33066-1632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE AGENCY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665031**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALLEN, ALEXANDRA, , ,**

Mailing Address P.O. BOX 58

City  
FERNANDINA BEACHState  
FLZip Code  
32035-0058FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

267.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664738**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.54



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1877 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667001**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, RONALD, , MR.,**

Mailing Address P.O. BOX 1444

City  
COEBURNState  
VAZip Code  
24230-1444FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LONE PINE EXTERMINATING CO., INC.Occupation (for Individual)  
PEST CONTROL OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665856**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. APEL, RONALD, H., MR.,**

Mailing Address 2345 2ND AVE NW

City  
CULLMANState  
ALZip Code  
35058-0470FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
APEL STEELOccupation (for Individual)  
STEEL FABRICATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666658**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1878 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AVANESOV, KAREN, , ,**

Mailing Address 199 WOODSIDE DRIVE

City  
HEWLETTState  
NYZip Code  
11557-2417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TOTAL ORTHOPEDICOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666800**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAILEY, ANN, , ,**

Mailing Address 104 CLUB PLACE CT

City

WARNER ROBINS

State

GA

Zip Code

31088-7551

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.75

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667170**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAINES, KEVIN, H., MR.,**

Mailing Address 457 S MARENGO AVE. UNIT 21

City

PASADENA

State

CA

Zip Code

91101-3937

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JPL/CALTECHKEVIN BAINESOccupation (for Individual)  
RESEARCH SCIENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.10

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664614**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

338.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1879 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAKER, ROBERT, , ,**

Mailing Address 927 MAIN STREET

City  
RAYLANDState  
OHZip Code  
43943-6868FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667091**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BALDOVIN, DONALD, E., MR.,**

Mailing Address 1108 LAVACA ST.,STE 110-122

City  
AUSTINState  
TXZip Code  
78701-2172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666915**

Amount of Each Receipt this Period

900.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAMERT, TOM, , ,**

Mailing Address BOX 336

City  
IONEState  
CAZip Code  
95640-0336FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1402.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665176**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

962.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1880 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BANKS, ALFRED, , ,**

Mailing Address 53 PECAN DRIVE

City  
ELLABELLState  
GAZip Code  
31308-7118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666557

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BANKS, ALFRED, , ,**

Mailing Address 53 PECAN DRIVE

City  
ELLABELLState  
GAZip Code  
31308-7118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667012

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BANNISTER, FRANK, , MR.,**

Mailing Address 420 NW 13

City  
OKLAHOMA CITYState  
OKZip Code  
73103-3735FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WESTERN OIL AND GASOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666193

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1881 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAUGHMAN, BARBARA, , ,**

Mailing Address 5 , MOUNTAIN VIEW AVE.

City  
BROOKFIELDState  
CTZip Code  
06804-1415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666163**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667456**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667458**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1882 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667459**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667462**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.06

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667463**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1883 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BELL, SAMUEL, , ,**

Mailing Address 3825 SWEET MAGNOLIA DR.

City  
GAINESVILLEState  
GAZip Code  
30504-5949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665533**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BELLUCHIE, LAURENCE, , ,**

Mailing Address 1910 TOWN CENTER BLVD

City  
ANNAPOLISState  
MDZip Code  
21401-3598FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666655**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BENNETT, BOB, , ,**

Mailing Address 14474 NAVAJO WAY

City  
MANTECAState  
CAZip Code  
95336-2546FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666142**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1884 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERRY, TERRY, , ,**

Mailing Address 1758 BROOKE ROAD

City  
STAFFORDState  
VAZip Code  
22554-5524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3644.60

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666201**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BHOGAL, RABI, , ,**

Mailing Address 8200 STOCKDALE HWAY M-10-298

City  
BAKERSFIELDState  
CAZip Code  
93311-1091FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667193**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BIDWELL, J., TRUMAN, MR., JR.**Mailing Address 2 SUTTON PLACE S  
APT 17ACity  
NEW YORKState  
NYZip Code  
10022-3799FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SULLIVAN & WORCESTER LLPOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.70

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666086**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

212.08



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1885 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BINGHAM, GLENN, S., MR.,**

Mailing Address 721 STEWARTS RD

City  
LANEXAState  
VAZip Code  
23089-8804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665464**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BINGHAM, GLENN, S., MR.,**

Mailing Address 721 STEWARTS RD

City  
LANEXAState  
VAZip Code  
23089-8804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665488**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLACK, JANE, , MRS.,**

Mailing Address P.O. BOX 703

City  
NESHANIC STATIONState  
NJZip Code  
08853-0703FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

516.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664999**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1886 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666563

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLAHA, RENE, , ,**

Mailing Address 2972 DIXON RD SW

City  
PATASKALAState  
OHZip Code  
43062-9602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL INTEGRATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666457

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLAKELEY, ROBERT, , ,**

Mailing Address 5133 HILLCREST DR.

City  
ZACHARYState  
LAZip Code  
70791-3203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

253.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665620

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1887 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLUMEL, GEORGE, , ,**

Mailing Address 316 NORTH COUNTRY CLUB DRIVE

City  
LAKE WORTHState  
FLZip Code  
33462-1002FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666870**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BODAK, LOUISE, , ,**

Mailing Address 2087 W JESTER WAY

City  
POST FALLSState  
IDZip Code  
83854-8191FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665584**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOROS, ELSIE, I., MRS.,**

Mailing Address 3432 MEADOW WOODS DR.

City  
BIRMINGHAMState  
ALZip Code  
35216-4408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667319**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

198.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1888 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOSMA, RACHEL, , ,**

Mailing Address 4078 SAGE SPRINGS

City  
KIMBERLYState  
IDZip Code  
83341-5370FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666707**

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOSS, CLINTON, , ,**

Mailing Address 10242 MATTOCK AVENUE

City  
DOWNEYState  
CAZip Code  
90241-3003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.26

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665185**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

820.31

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664842**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

306.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1889 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664846**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664850**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

820.31

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664854**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

34.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1890 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664855**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664857**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOWEN, STEPHEN, , ,**

Mailing Address 212 IVY RD

City  
EQUALITYState  
ALZip Code  
36026-2740FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CRADDOCK HEALTH CENTEROccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665195**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1891 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOX, SALLY, , ,**

Mailing Address 4885 SEVIERVILLE RD

City  
MARYVILLE

State  
TN

Zip Code  
37804-4651

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.79

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27665212**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOX, SALLY, , ,**

Mailing Address 4885 SEVIERVILLE RD

City  
MARYVILLE

State  
TN

Zip Code  
37804-4651

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.79

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27665213**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOX, SALLY, , ,**

Mailing Address 4885 SEVIERVILLE RD

City  
MARYVILLE

State  
TN

Zip Code  
37804-4651

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

752.79

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27665255**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

156.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1892 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOX, SALLY, , ,**

Mailing Address 4885 SEVIERVILLE RD

City  
MARYVILLEState  
TNZip Code  
37804-4651FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665262**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMASState  
ORZip Code  
97015-8629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666023**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMASState  
ORZip Code  
97015-8629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666121**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1893 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRADDOCK, DAVID, , ,**

Mailing Address P O BOX 601176

City  
DALLASState  
TXZip Code  
75360-1176FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

928.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664881

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRASIE, DONALD, R., MR.,**

Mailing Address 4860 LONE OAK CT

City  
ANN ARBORState  
MIZip Code  
48108-8575FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664804

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRODERICK, FRANCIS, , ,**

Mailing Address 16 DUCK POND LN

City  
RAMSEYState  
NJZip Code  
07446-1643FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664664

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

231.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1894 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.45

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665745**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, CHARLES, W., MR.,**

Mailing Address 635 CONDER RD

City  
COPPERAS COVEState  
TXZip Code  
76522-7002FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667107**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, NELON, T., MR.,**

Mailing Address 14324 N 800 E

City  
ODONState  
INZip Code  
47562-5303FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.70

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667250**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

69.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1895 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRUMBAUGH, PHILIP, C., MR.,**

Mailing Address 108 PHILIP DR

City  
WEST MILTONState  
OHZip Code  
45383-1330FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664630**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRYANT, BASSETT, , ,**

Mailing Address 112 ADOBE PO 350

City  
RUIDOSO DOWNSState  
NMZip Code  
88346-9713FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667039**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITYState  
NJZip Code  
08226-2367FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

553.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664809**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1896 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUCKLEW, TERRENCE, , MR.,**

Mailing Address 721 CORONADO AVE

City  
CORONADOState  
CAZip Code  
92118-2033FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665036**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUDRAS, JOSEPH, , MR.,**

Mailing Address 3432 PUTNAM ST

City  
FALLS CHURCHState  
VAZip Code  
22042-3727FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665256**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUNN, DANIEL, W., MR.,**

Mailing Address P.O. BOX 5005 PMB 116

City  
RANCHO SANTA FEState  
CAZip Code  
92067-5005FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DANIEL W. BUNNOccupation (for Individual)  
INVESTORS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

431.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666054**

Amount of Each Receipt this Period

118.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

249.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1897 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664953**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664984**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, FRANCIS, C., MR.,**

Mailing Address 5432 S SALVATION PL.

City  
SIOUX FALLSState  
SDZip Code  
57108-8543FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

953.96

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666264**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.89

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1898 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAPESTRO, PAULA, , ,**

Mailing Address P.O. BOX 791

City  
RANCHO SANTA FEState  
CAZip Code  
92067-0791FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FAR WEST WATER & SEWER, INCOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.2766683**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665007**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CASE, CHARLES, , MR.,**

Mailing Address 1540 CARR ST

City  
RALEIGHState  
NCZip Code  
27608-2302FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EARTH AND WATER LAWOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667033**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1899 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CASSENTI, JEAN, , ,**

Mailing Address 29 ARNOLD DR

City  
TOLLANDState  
CTZip Code  
06084-2810FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666519**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664876**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CERNOSEK, ROSE MARY, , MRS.,**

Mailing Address 21714 RUGOSA HL

City  
SAN ANTONIOState  
TXZip Code  
78256-2453FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

955.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667198**

Amount of Each Receipt this Period

955.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1001.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1900 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CERNUDA, HERMINIO, L., MR.,**

Mailing Address 5320 SW 5TH TER

City  
CORAL GABLESState  
FLZip Code  
33134-1126FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.11

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666934**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANA, MAGHAR, S., MR.,**

Mailing Address 315 MERCEDES LANE

City  
COLBURNState  
INZip Code  
47905-4566FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.51

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667246**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHRESTENSEN, PAUL, , ,**

Mailing Address 148 EDGEMERE WAY S

City  
NAPLESState  
FLZip Code  
34105-7107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

579.96

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665708**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

58.41



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1901 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CIPOLLINA, NATALE, , ,**

Mailing Address 6 S 12TH ST

City  
NEW HYDE PARKState  
NYZip Code  
11040-4930FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BARUCH COLLEGEOccupation (for Individual)  
ADJUNCT PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.01

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665889**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CIPOLLINA, NATALE, , ,**

Mailing Address 6 S 12TH ST

City  
NEW HYDE PARKState  
NYZip Code  
11040-4930FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BARUCH COLLEGEOccupation (for Individual)  
ADJUNCT PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.01

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666513**

Amount of Each Receipt this Period

12.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CIPOLLINA, NATALE, , ,**

Mailing Address 6 S 12TH ST

City  
NEW HYDE PARKState  
NYZip Code  
11040-4930FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BARUCH COLLEGEOccupation (for Individual)  
ADJUNCT PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.01

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666520**

Amount of Each Receipt this Period

2.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

51.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1902 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CIPOLLINA, NATALE, , ,**

Mailing Address 6 S 12TH ST

City  
NEW HYDE PARKState  
NYZip Code  
11040-4930FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BARUCH COLLEGEOccupation (for Individual)  
ADJUNCT PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666526**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLANCY, MEGAN, , MS.,**

Mailing Address P.O. BOX 11704

City  
ZEPHYR COVEState  
NVZip Code  
89448-3704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666458**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLARK, BARBARA, W., MRS.,**

Mailing Address 1170 GORDON COMBS RD NW

City  
MARIETTAState  
GAZip Code  
30064-1226FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ELEGANT IDEAS INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

562.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667384**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

333.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1903 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLARK, CHARLES, , ,**

Mailing Address 522 CLYDESDALE DRIVE

City  
NEW HOPEState  
PAZip Code  
18938-5816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664943**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, STEPHEN, B., MR.,**

Mailing Address 4202 SKYLINE DR

City  
FARMINGTONState  
NMZip Code  
87401-9224FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666222**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLARKSON, WALTER, , ,**

Mailing Address 2079 SUJA LANE

City  
COPPERAS COVEState  
TXZip Code  
76522-6121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666114**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

258.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1904 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLAVEL, ROBERT, L., MR.,**

Mailing Address 827 CARILLON DR.

City  
BARTLETTState  
ILZip Code  
60103-4596FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.41

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666499**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLAVEL, ROBERT, L., MR.,**

Mailing Address 827 CARILLON DR.

City  
BARTLETTState  
ILZip Code  
60103-4596FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.41

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666504**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COKER, ELIZABETH, , ,**

Mailing Address P O BOX 201

City  
TURBEVILLEState  
SCZip Code  
29162-0201FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.45

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665279**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1905 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667179**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666069**

Amount of Each Receipt this Period

1.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLUCCI, MARYLOU, , ,**

Mailing Address 127 BAYVIEW LN

City  
STATEN ISLANDState  
NYZip Code  
10309-3638FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

344.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665315**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

58.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1906 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLUCCI, MARYLOU, , ,**

Mailing Address 127 BAYVIEW LN

City  
STATEN ISLANDState  
NYZip Code  
10309-3638FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666477**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONRAD, STUART, W., MR.,**

Mailing Address 8522 FREDERICK DR.

City  
DE SOTOState  
KSZip Code  
66018-7110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666872**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664727**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1907 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664752**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664814**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.19

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664847**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1908 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664863

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664873

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665978

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.11



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1909 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOOD

State  
IN

Zip Code  
46142-3722

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

**02** / **09** / **2025**

**Transaction ID : SA11A.27666030**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOOD

State  
IN

Zip Code  
46142-3722

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

**02** / **09** / **2025**

**Transaction ID : SA11A.27666041**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOOD

State  
IN

Zip Code  
46142-3722

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.19

Date of Receipt

**02** / **09** / **2025**

**Transaction ID : SA11A.27667389**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

78.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1910 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667390

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COONLY, JOHN, , ,**

Mailing Address 300 WEST AVE APT 2326

City  
AUSTINState  
TXZip Code  
78701-3808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667409

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COX, JUNE, , ,**

Mailing Address 159 NTH 4TH AVE

City  
FORSYTHState  
MTZip Code  
59327-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

318.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667326

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

66.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1911 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664926**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666708**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIGO, JACQUELINE, L., MS.,**

Mailing Address 1049 SUMMIT DR

City  
MOUNT VERNONState  
OHZip Code  
43050-9576FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1371.80

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664852**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.49

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1912 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIG, JUDY, , ,**

Mailing Address 4206 S. CANTAMAR DRIVE

City  
SAINT GEORGE

State  
UT

Zip Code  
84790-4862

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.96

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27666905**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIG, JUDY, , ,**

Mailing Address 4206 S. CANTAMAR DRIVE

City  
SAINT GEORGE

State  
UT

Zip Code  
84790-4862

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.96

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27667393**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURRY, ROBERT, J., ,**

Mailing Address 1205 ANDTE CIR.

City  
CLAREMORE

State  
OK

Zip Code  
74017-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.13

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27664760**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

53.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1913 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURRY, ROBERT, J., ,**

Mailing Address 1205 ANDTE CIR.

City  
CLAREMOREState  
OKZip Code  
74017-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.13

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664772**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURRY, ROBERT, J., ,**

Mailing Address 1205 ANDTE CIR.

City  
CLAREMOREState  
OKZip Code  
74017-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.13

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666501**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURTIS, SUSAN, , ,**Mailing Address 19501 40TH AVE W  
UNIT 519City  
LYNNWOODState  
WAZip Code  
98036-5976FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

430.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667337**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1914 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURTIS, SUSAN, , ,**Mailing Address 19501 40TH AVE W  
UNIT 519City  
LYNNWOODState  
WAZip Code  
98036-5976FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667338**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURTIS, SUSAN, , ,**Mailing Address 19501 40TH AVE W  
UNIT 519City  
LYNNWOODState  
WAZip Code  
98036-5976FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667339**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURTIS, SUSAN, , ,**Mailing Address 19501 40TH AVE W  
UNIT 519City  
LYNNWOODState  
WAZip Code  
98036-5976FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667340**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1915 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAHLBERG, NANCY, , MRS.,**

Mailing Address 208 PONDEROSA PINE DR

City  
BLUE EYEState  
MOZip Code  
65611-8244FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INTERIOR DESIGNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.34

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665430**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DANNA, JOSEPH, , ,**

Mailing Address 610 CROSS CREEK RD

City  
AVELLAState  
PAZip Code  
15312-2214FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.40

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664992**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667310**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

220.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1916 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667316**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEGRISSELLES, JANET, , ,**

Mailing Address 14638 SAGAMORE COURT

City  
FORT MYERSState  
FLZip Code  
33908-4912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.70

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664689**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEGROODT, RALPH, , ,**

Mailing Address 31661 WELL BOTTOM RD

City  
GALENAState  
MDZip Code  
21635-1334FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

309.78

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667217**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.69



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1917 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEL ROSSO, NITA, , ,**

Mailing Address 3244 E WICKIEUP LN

City  
PHOENIXState  
AZZip Code  
85050-7915FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.30

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.2766235**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DESSAUER, MARILYNN, , ,**

Mailing Address 8679 BLUE FLAG WAY

City  
NAPLESState  
FLZip Code  
34109-4300FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.61

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665608**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIBARTOLOMEO, BETTY, M., MS.,**

Mailing Address 135 OAKMONT CIR.

City  
PINEHURSTState  
NCZip Code  
28374-8342FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.74

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665666**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

32.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1918 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DICKSON, JAMES, , ,**

Mailing Address 2155 CACTUS CT #1

City  
WALNUT CREEKState  
CAZip Code  
94595-2530FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666103**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIONNE, DOUGLAS, , ,**

Mailing Address 6122 WINDY KNL

City  
WINDCRESTState  
TXZip Code  
78239-2655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666755**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIXON, JOHN, , ,**

Mailing Address 11030 MADISON CT

City  
BEAUMONTState  
TXZip Code  
77705-9600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WELLSFARGOADVISORSOccupation (for Individual)  
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

812.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665855**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1919 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DONAT, NICOLETTA, , ,**Mailing Address 1841 CENTRAL PARK AVE  
APT 1GCity  
YONKERSState  
NYZip Code  
10710-2946FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

621.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665261**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DONOVAN, ANNE, , ,**

Mailing Address 4 WEDGE LANE

City  
SELDENState  
NYZip Code  
11784-3309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664679**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOREN, HARVEY, F., MR.,**

Mailing Address 123 WASHINGTON ST

City  
DEDHAMState  
MAZip Code  
02026-2031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666044**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1920 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUCHAMP, CHARLES, , ,**

Mailing Address 4712 PARIS DRIVE

City  
ORANGEState  
TXZip Code  
77632-1424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.56

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666781**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUCHAMP, CHARLES, , ,**

Mailing Address 4712 PARIS DRIVE

City  
ORANGEState  
TXZip Code  
77632-1424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.56

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666786**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUCHAMP, CHARLES, , ,**

Mailing Address 4712 PARIS DRIVE

City  
ORANGEState  
TXZip Code  
77632-1424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

301.56

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666789**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1921 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DULSKI, BETHANY, , ,**

Mailing Address 40118 AZALEA DR

City  
PONCHATOULAState  
LAZip Code  
70454-6526FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RAPID MEDICAL WEIGHT LOSSOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665217**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNCAN, ALTA, M., ,**Mailing Address 1001 W LAMBERT RD  
SPC 160City  
LA HABRAState  
CAZip Code  
90631-1522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666814**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EADES, LINDA, , ,**

Mailing Address 14250 STATE ROUTE JJ

City  
WEST PLAINSState  
MOZip Code  
65775-5834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666380**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1922 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EASH, ESTHER, , ,**

Mailing Address 420 VILLAGE LN

City  
SOUTH HUTCHINSONState  
KSZip Code  
67505-1734FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.50

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666065**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-6174FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.64

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665659**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-6174FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

640.64

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665771**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1923 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-6174FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665784

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-6174FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665914

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EDWARDS, WALTER, C., DR.,**

Mailing Address 404 TOWNSEND PL NW

City  
ATLANTAState  
GAZip Code  
30327-3038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666330

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

79.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1924 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSONState  
MDZip Code  
21204-4701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

Transaction ID : SA11A.27666141

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELAS BOADO, MARIO, , ,**

Mailing Address 40120 SAGEWOOD DR

City  
PALM DESERTState  
CAZip Code  
92260-2321FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.43

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

Transaction ID : SA11A.27666692

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELDAR, LUE ANN, , ,**

Mailing Address 1632 HARMON COVE TOWER

City  
SECAUCUSState  
NJZip Code  
07094-1766FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMAZONOccupation (for Individual)  
E-COMMERCE OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

Transaction ID : SA11A.27665881

Amount of Each Receipt this Period

37.48

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

81.14



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1925 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ENDO, YOI, , ,

Mailing Address 1273 ALA NAPUNANI ST.

City  
HONOLULUState  
HIZip Code  
96818-1626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666251

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ENDO, YOI, , ,

Mailing Address 1273 ALA NAPUNANI ST.

City  
HONOLULUState  
HIZip Code  
96818-1626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666255

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ENDO, YOI, , ,

Mailing Address 1273 ALA NAPUNANI ST.

City  
HONOLULUState  
HIZip Code  
96818-1626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

445.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666261

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1926 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENDO, YOI, , ,**

Mailing Address 1273 ALA NAPUNANI ST.

City  
HONOLULUState  
HIZip Code  
96818-1626FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666263**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664829**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664830**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1927 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664835**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664837**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ESCOBEDO, MATTHEW, , ,**

Mailing Address 1323 E. LOMA VISTA ST.

City  
WEST COVINAState  
CAZip Code  
91790-1825FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EMANATE HEALTHOccupation (for Individual)  
IMAGING ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.35

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666698**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1928 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FABELO, MARGARITA, , ,**

Mailing Address 19701 EAST LAKE DRIVE

City  
HIALEAHState  
FLZip Code  
33015-2221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.06

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

Transaction ID : SA11A.27667145

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FABELO, MARGARITA, , ,**

Mailing Address 19701 EAST LAKE DRIVE

City  
HIALEAHState  
FLZip Code  
33015-2221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.06

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

Transaction ID : SA11A.27667147

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FABELO, MARGARITA, , ,**

Mailing Address 19701 EAST LAKE DRIVE

City  
HIALEAHState  
FLZip Code  
33015-2221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.06

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

Transaction ID : SA11A.27667149

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

61.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1929 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FABELO, MARGARITA, , ,**

Mailing Address 19701 EAST LAKE DRIVE

City  
HIALEAHState  
FLZip Code  
33015-2221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667151

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FANNIN, SUZAN, , MS.,**

Mailing Address 5903 85TH ST

City  
LUBBOCKState  
TXZip Code  
79424-3602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666422

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

605.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664600

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

71.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1930 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665417**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666288**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FARRINGTON, ARTHUR, , ,**

Mailing Address 8145 MAJORS RIDGE WAY

City  
CUMMINGState  
GAZip Code  
30041-9359FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666622**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1931 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FELLEZ, FRANK, , ,**

Mailing Address W1319 AUBURN ASHFORD DR

City  
CAMPBELLSPORTState  
WIZip Code  
53010-3211FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664667**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FERREE, JOEL, , ,**

Mailing Address 129 BURNING PINE COURT

City  
PONTE VEDRA BEACHState  
FLZip Code  
32082-3634FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COFFEE REGIONAL MEDICAL CENTEROccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.56

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665492**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FERREE, JOEL, , ,**

Mailing Address 129 BURNING PINE COURT

City  
PONTE VEDRA BEACHState  
FLZip Code  
32082-3634FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COFFEE REGIONAL MEDICAL CENTEROccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

572.56

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665505**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

312.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1932 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FERREE, JOEL, , ,**

Mailing Address 129 BURNING PINE COURT

City  
PONTE VEDRA BEACHState  
FLZip Code  
32082-3634FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COFFEE REGIONAL MEDICAL CENTEROccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665527**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FILIPSKI, DARLA, , ,**

Mailing Address 3903 PRESTON CT

City  
NORMANState  
OKZip Code  
73072-5019FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666568**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FINCH, OWEN, , ,**

Mailing Address 5210 CHAMPLAIN BEND ST

City  
HOUSTONState  
TXZip Code  
77056-4206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

785.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666368**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

205.13



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1933 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLORA, SCOTT, , ,**

Mailing Address 4068 CURLED DOCK LANE

City  
ODENTONState  
MDZip Code  
21113-3143FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666394

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLOYD, JOHN, D., ,**

Mailing Address 3418 NORTHBORO CT.

City  
MURFREESBOROState  
TNZip Code  
37129-1208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665443

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLOYD, JOHN, D., ,**

Mailing Address 3418 NORTHBORO CT.

City  
MURFREESBOROState  
TNZip Code  
37129-1208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

293.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666138

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1934 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORSTER, KATHY, , MS.,**

Mailing Address 712 LA MARITE DR

City  
MANCHESTERState  
MOZip Code  
63021-7014FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SSMOccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666926**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRUGE, RUBY, JOYCE, ,**

Mailing Address 2004 HIGHWAY 103

City  
PORT BARREState  
LAZip Code  
70577-5310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

751.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665974**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLAGHER, JERRY, , ,**

Mailing Address 3979COUNTY RD 826

City  
ANNAState  
TXZip Code  
75409-3016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

264.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665224**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1935 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLUN, CHERYL, , ,**

Mailing Address 3556 PARADISE DRIVE

City  
WEST BENDState  
WIZip Code  
53095-8765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665880

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665915

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665921

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

112.42

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1936 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665934**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GELBMAN, JOEL, , ,**

Mailing Address 6476 ARRIBA AVE

City  
NAPLESState  
FLZip Code  
34113-9061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666652**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILSTRAP, JAMES, C., MR.,**

Mailing Address 221 ESTELLE LANE

City  
LUCASState  
TXZip Code  
75002-7741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

731.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665504**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1937 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILSTRAP, JAMES, , ,**

Mailing Address 922 PENNY LANE

City  
SAINT PETERSState  
MOZip Code  
63376-7367FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666579**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILSTRAP, JAMES, C., MR.,**

Mailing Address 221 ESTELLE LANE

City  
LUCASState  
TXZip Code  
75002-7741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

731.13

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666619**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIORDANO, MICHAEL, , ,**

Mailing Address 59 YOWAGO AVE

City  
BRANFORDState  
CTZip Code  
06405-5526FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIORDANOOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3029.95

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665840**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1938 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIORDANO, MICHAEL, , ,**

Mailing Address 59 YOWAGO AVE

City  
BRANFORDState  
CTZip Code  
06405-5526FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GIORDANOOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3029.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665845**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIRVIN, JOANN, , MRS.,**

Mailing Address 7110 CREEKSIDE DR.

City  
LANSINGState  
MIZip Code  
48917-9618FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665582**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLADUE, CRAIG, , ,**

Mailing Address 1061 S SPRUCE AVE

City  
BLOOMINGTONState  
CAZip Code  
92316-1531FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

302.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664825**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

283.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1939 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLADUE, CRAIG, , ,**

Mailing Address 1061 S SPRUCE AVE

City  
BLOOMINGTONState  
CAZip Code  
92316-1531FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665177

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLADUE, CRAIG, , ,**

Mailing Address 1061 S SPRUCE AVE

City  
BLOOMINGTONState  
CAZip Code  
92316-1531FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665299

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLADUE, CRAIG, , ,**

Mailing Address 1061 S SPRUCE AVE

City  
BLOOMINGTONState  
CAZip Code  
92316-1531FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

302.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665358

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1940 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GODFREY, EVA, , MS.,**

Mailing Address 3710 S EUFAULA AVE

City  
EUFAULAState  
ALZip Code  
36027-5027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665873**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOLDMAN, BARBARA, , ,**

Mailing Address 798 N 73RD WEST AVE

City  
TULSAState  
OKZip Code  
74127-5683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.53

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664920**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOOD, BRENDA, , ,**

Mailing Address 1213 WARWICK DR.

City  
MIAMISBURGState  
OHZip Code  
45342-3250FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

399.55

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666931**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.95



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1941 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667011**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667016**

Amount of Each Receipt this Period

0.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORGES, MATT, , ,**

Mailing Address 6030 N LITCHFIELD RD

City  
LITCHFIELD PARKState  
AZZip Code  
85340-5240FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665384**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1942 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORGES, MATT, , ,**

Mailing Address 6030 N LITCHFIELD RD

City  
LITCHFIELD PARKState  
AZZip Code  
85340-5240FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665389**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOSHGARIAN, JACK, , ,**

Mailing Address 9729 CHAPEL ROAD

City  
PHILADELPHIAState  
PAZip Code  
19115-2528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665105**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOSHGARIAN, JACK, , ,**

Mailing Address 9729 CHAPEL ROAD

City  
PHILADELPHIAState  
PAZip Code  
19115-2528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

246.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665108**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1943 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOSHGARIAN, JACK, , ,**

Mailing Address 9729 CHAPEL ROAD

City  
PHILADELPHIAState  
PAZip Code  
19115-2528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665116**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREENE, KARLSON, , ,**

Mailing Address 7 SUNNYSIDE RD

City  
THORNTONState  
PAZip Code  
19373-1018FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DCS CORP INCOccupation (for Individual)  
ELECTRICAL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666343**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, LINDA, , ,**

Mailing Address 15657 FM 244

City  
IOLAState  
TXZip Code  
77861-3867FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.70

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664980**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1944 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, LINDA, , ,**

Mailing Address 15657 FM 244

City  
IOLAState  
TXZip Code  
77861-3867FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665115

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, LINDA, , ,**

Mailing Address 15657 FM 244

City  
IOLAState  
TXZip Code  
77861-3867FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666102

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREGORY, BEVERLY, , MS.,**

Mailing Address 805 FOX RIDGE LN

City  
WILMINGTONState  
NCZip Code  
28405-5259FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665494

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1945 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRISSOM, LINDA, , ,**

Mailing Address 1598 LEISURE WORLD

City  
MESAState  
AZZip Code  
85206-2315FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AWRCOccupation (for Individual)  
NURSE PRACTITIONER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665083**

Amount of Each Receipt this Period

19.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROEFSEMA, GLENN, , ,**

Mailing Address 10122 87TH AVE SW

City  
LAKEWOODState  
WAZip Code  
98498-4459FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664968**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROGAN, KIMBERLY, , ,**

Mailing Address PO BOX 875

City  
MANHATTAN BEACHState  
CAZip Code  
90267-0875FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664688**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1946 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROGAN, KIMBERLY, , ,**

Mailing Address PO BOX 875

City  
MANHATTAN BEACHState  
CAZip Code  
90267-0875FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665293**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROSE, ROY, , ,**

Mailing Address 1401 FOURAKER RD

City  
JACKSONVILLEState  
FLZip Code  
32221-6682FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666650**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRUBBS, JANIECE, , MS.,**

Mailing Address 9704 PAVILION DR.

City  
BAKERSFIELDState  
CAZip Code  
93312-5988FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665253**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1947 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRUBBS, JANIECE, , MS.,**

Mailing Address 9704 PAVILION DR.

City  
BAKERSFIELDState  
CAZip Code  
93312-5988FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666734**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUDORF, KENNETH, , ,**

Mailing Address 970 CAPE MARCO DR.

City  
MARCO ISLANDState  
FLZip Code  
34145-6399FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1716.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666258**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUM, GAYLE, , MS.,**

Mailing Address 509 VISTA CV

City  
VICTORIAState  
TXZip Code  
77904-1310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRADY BEARINGOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

645.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667362**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.18

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1948 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAAS, RICHARD, , ,**

Mailing Address 318BOCA DEL CANON

City  
SAN CLEMENTE

State  
CA

Zip Code  
92672-5402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.25

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27665904**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAAS, RICHARD, , ,**

Mailing Address 318BOCA DEL CANON

City  
SAN CLEMENTE

State  
CA

Zip Code  
92672-5402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.25

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27666381**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HACKL, MARK, , ,**

Mailing Address 485 HICKORY NUT AVE

City  
OLDSMAR

State  
FL

Zip Code  
34677-2016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

294.15

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27666321**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

79.80



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1949 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAHNEMANN, ARTUR, , ,**

Mailing Address 4510 140TH AVE SE

City  
BELLEVUEState  
WAZip Code  
98006-2343FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.30

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666396**

Amount of Each Receipt this Period

13.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAISLER, SHIRLEY, A., MS.,**

Mailing Address 1200 COWLING RD

City  
SANGERState  
TXZip Code  
76266-9084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.50

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666068**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HALL, ED, , ,**

Mailing Address 5630 IMPERIAL WAY SW

City  
BREMERTONState  
WAZip Code  
98312-4945FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665621**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1950 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HALL, GERRY, D., ,**

Mailing Address PO BOX 80695

City  
AUSTINState  
TXZip Code  
78708-0695FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666802**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HALL, ROSEMARY, , ,**

Mailing Address 6532 PASILLA RD. NE

City

RIO RANCHO

State

NM

Zip Code

87144-4902

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.61

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666005**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HANMER, GARY, , ,**

Mailing Address 3033 HARDING WAY

City

COSTA MESA

State

CA

Zip Code

92626-2852

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.04

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666331**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1951 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANMER, GARY, , ,**

Mailing Address 3033 HARDING WAY

City  
COSTA MESAState  
CAZip Code  
92626-2852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.04

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666367**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSEN, TERESA, , ,**

Mailing Address 2917 , KANDAHAR DR

City  
SAINT CHARLESState  
MOZip Code  
63303-3166FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.03

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667280**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRIS, ROD, , ,**

Mailing Address 15515 SE RIVERSHORE DR.

City  
VANCOUVERState  
WAZip Code  
98683-5380FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

669.12

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665788**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.25

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1952 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRYMAN, CHARLOTTE, , ,

Mailing Address 16415 WAGON WHEEL DRIVE

City  
RIVERSIDEState  
CAZip Code  
92506-5849FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664824

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HART, LEEANN, , ,

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665457

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HART, LEEANN, , ,

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665458

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

37.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1953 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HART, LEEANN, , ,

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665461

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HART, LEEANN, , ,

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665465

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HART, LEEANN, , ,

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665469

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1954 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666111**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666115**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666116**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

5.06

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1955 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666117**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666120**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666124**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1956 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARWARD, JAMES, , ,**

Mailing Address 322 NEW KENT PLACE

City  
CARYState  
NCZip Code  
27511-4584FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.88

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667129**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAYES, DELMORE, G., MR.,**

Mailing Address 81862 SUN CACTUS LN

City

LA QUINTA

State

CA

Zip Code

92253-7745

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.47

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666420**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAYWOOD, DAVID, , ,**

Mailing Address 415 BLUE POINT ROAD

City

CLEAR LAKE SHORES

State

TX

Zip Code

77565-2365

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.50

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665006**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.99



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1957 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEALY, MICHAEL, , MR.,**

Mailing Address 2435 N ROCK CREEK DR

City  
LOS BANOSState  
CAZip Code  
93635-8827FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666716**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEATH, DARWIN, , ,**

Mailing Address P.O. BOX 16

City  
SOUTH DENNISState  
MAZip Code  
02660-0016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665747**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEBERT, PETER, , ,**

Mailing Address 3317 S HIGLEY RD SUITE 114-226

City  
GILBERTState  
AZZip Code  
85297-5436FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667055**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

128.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1958 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664807**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664812**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664815**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

54.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1959 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664819**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEFFERS, REGINA, , ,**

Mailing Address 120 14TH AVE

City  
SEA CLIFFState  
NYZip Code  
11579-1221FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1876.62

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665503**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEINRICHS, SARAH, J., MRS.,**

Mailing Address 6004 AMBER OAKS AVE

City  
BAKERSFIELDState  
CAZip Code  
93306-7008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

324.54

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664597**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1960 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEINRICH, SARAH, J., MRS.,**

Mailing Address 6004 AMBER OAKS AVE

City  
BAKERSFIELDState  
CAZip Code  
93306-7008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.54

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664618**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEINRICH, SARAH, J., MRS.,**

Mailing Address 6004 AMBER OAKS AVE

City  
BAKERSFIELDState  
CAZip Code  
93306-7008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.54

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664788**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HELLER, MICHAEL, , ,**

Mailing Address 231 SUNNYSIDE AVE.

City  
PIEDMONTState  
CAZip Code  
94611-4455FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.26

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665962**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1961 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENRY, JAMES, R., MR.,**

Mailing Address 2608 COLLEGE DRIVE

City  
VICTORIAState  
TXZip Code  
77901-4482FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE AND SECURITIES SALE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.52

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666895**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENTHORN, JIM, , ,**

Mailing Address 242 COUNTY HIGHWAY 183 NORTH

City  
DEFUNIAK SPRINGSState  
FLZip Code  
32433-4394FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.77

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665059**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERROLD, BARBARA, J., MRS.,**

Mailing Address 3738 MARSBELLA PL

City  
KALAMAZOOState  
MIZip Code  
49006-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
K O PRODUCTSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1029.47

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665470**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.48

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1962 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERROLD, BARBARA, J., MRS.,**

Mailing Address 3738 MARSBELLA PL

City  
KALAMAZOO

State  
MI

Zip Code  
49006-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
K O PRODUCTS

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.47

Date of Receipt

**02** / **09** / **2025**

**Transaction ID : SA11A.27666634**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, JOHN, , ,**

Mailing Address 25 E 40TH ST  
APT 6B

City  
INDIANAPOLIS

State  
IN

Zip Code  
46205-5602

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.14

Date of Receipt

**02** / **09** / **2025**

**Transaction ID : SA11A.27664743**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWN

State  
NJ

Zip Code  
08057-2931

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SITE DEVELOPMENT

Occupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

**02** / **09** / **2025**

**Transaction ID : SA11A.27665077**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

130.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1963 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665138**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665899**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665900**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1964 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665908**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665910**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLMAN, PATRICK, , ,**

Mailing Address 34 HUNTERSTOWN ROAD

City  
GERMANTOWNState  
NYZip Code  
12526-5604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

522.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666911**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1965 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIPP, CHARLES, R., ,**

Mailing Address 4226 ROBERTS RD

City  
KERSHAWState  
SCZip Code  
29067-8761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.99

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664774**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HODGES, MEREDITH, S., ,**

Mailing Address 2457 S COUNTY ROAD 19

City  
LOVELANDState  
COZip Code  
80537-9044FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664742**

Amount of Each Receipt this Period

950.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOFF, JOHN, , ,**

Mailing Address 2201 W. SINTO

City  
SPOKANEState  
WAZip Code  
99201-2946FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

379.93

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664631**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1031.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1966 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOFF, JOHN, , ,**

Mailing Address 2201 W. SINTO

City  
SPOKANEState  
WAZip Code  
99201-2946FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664632**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOFF, JOHN, , ,**

Mailing Address 2201 W. SINTO

City  
SPOKANEState  
WAZip Code  
99201-2946FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664634**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOFF, JOHN, , ,**

Mailing Address 2201 W. SINTO

City  
SPOKANEState  
WAZip Code  
99201-2946FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

379.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664637**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1967 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOFF, JOHN, , ,**

Mailing Address 2201 W. SINTO

City  
SPOKANEState  
WAZip Code  
99201-2946FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.93

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664639**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOFF, JOHN, , ,**

Mailing Address 2201 W. SINTO

City  
SPOKANEState  
WAZip Code  
99201-2946FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.93

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664643**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUSTAD, JANET, , ,**

Mailing Address 51806 PELICAN POINT DRIVE

City  
DETROIT LAKESState  
MNZip Code  
56501-9405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

898.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667465**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1968 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUSTAD, JANET, , ,**

Mailing Address 51806 PELICAN POINT DRIVE

City  
DETROIT LAKESState  
MNZip Code  
56501-9405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

898.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667466**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUSTAD, JANET, , ,**

Mailing Address 51806 PELICAN POINT DRIVE

City  
DETROIT LAKESState  
MNZip Code  
56501-9405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

898.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667467**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUTCHISON, ELAINE, W., ,**

Mailing Address 4543 E. ANAHEIM STREET

City  
LONG BEACHState  
CAZip Code  
90804-3119FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PARAGON EQUITIESOccupation (for Individual)  
MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665282**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1969 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUTCHINSON, ROBERT, , ,**

Mailing Address 37 WHIPOWILL BEND

City  
THOMASVILLEState  
GAZip Code  
31757-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666407**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUTSON, D, RUTH, ,**

Mailing Address 509 CRYSTAL SPRINGS CIRCLE

City  
JOHNSON CITYState  
TNZip Code  
37615-2356FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665813**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664957**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1970 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.56

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664755**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.56

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666277**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IVAN, DENNIS, , ,**

Mailing Address 240 PINEWOOD ROAD

City  
FREDERICKSBURGState  
VAZip Code  
22405-3578FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CACIOccupation (for Individual)  
SYSTEMS ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665587**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1971 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACKSON, GEORGE, A., MR.,**

Mailing Address 1630 ELMVIEW DR.

City  
HOUSTONState  
TXZip Code  
77080-7223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666167

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACKSON, GEORGE, A., MR.,**

Mailing Address 1630 ELMVIEW DR.

City  
HOUSTONState  
TXZip Code  
77080-7223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666384

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACKSON, JAMES, A., ,**Mailing Address 262 LITTLE HENDRICKS MT CIRCLE  
#20820City  
JASPERState  
GAZip Code  
30143-7548FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665677

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

149.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1972 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664605

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JANES, JEFFREY, , ,**

Mailing Address 3610 CAPE FOREST DR.

City  
KINGWOODState  
TXZip Code  
77345-1321FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666289

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JANSEN, WILFRED, , ,**

Mailing Address P.O. BOX 612

City  
GOLD HILLState  
ORZip Code  
97525-0612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666582

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

159.74



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1973 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAUDES, MARY, K., MRS.,**

Mailing Address 12657 BRADFORD WOODS DR.

City  
SAINT LOUISState  
MOZip Code  
63127-1360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.95

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666701**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAVIER, FLORDELINA, , ,**

Mailing Address 7566 EASTHILL DR

City  
SAN DIEGOState  
CAZip Code  
92114-3343FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.81

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664636**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAVIER, FLORDELINA, , ,**

Mailing Address 7566 EASTHILL DR

City  
SAN DIEGOState  
CAZip Code  
92114-3343FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.81

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664641**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1974 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEANS, JOHN, , ,**Mailing Address 235 INVERNESS CENTER DRIVE  
APT 201City  
BIRMINGHAMState  
ALZip Code  
35242-5606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667434

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666574

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666575

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.42

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1975 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666577

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666590

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JERNIGAN, JOHNNY, , ,**

Mailing Address 2328 E LAKEVIEW AVE

City  
PENSACOLAState  
FLZip Code  
32503-4929FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOHNNY JERNIGANOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666647

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

101.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1976 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEWETT, STEVEN, , ,**

Mailing Address 31896 BIRCHWOOD DRIVE

City  
LAKE ELSINOREState  
CAZip Code  
92532-2628FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665359

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JEWETT, STEVEN, , ,**

Mailing Address 31896 BIRCHWOOD DRIVE

City  
LAKE ELSINOREState  
CAZip Code  
92532-2628FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665821

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEWETT, STEVEN, , ,**

Mailing Address 31896 BIRCHWOOD DRIVE

City  
LAKE ELSINOREState  
CAZip Code  
92532-2628FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665839

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

144.72

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1977 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEWETT, STEVEN, , ,**

Mailing Address 31896 BIRCHWOOD DRIVE

City  
LAKE ELSINORE

State  
CA

Zip Code  
92532-2628

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27665874**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGS

State  
ID

Zip Code  
83276-1671

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.88

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27666782**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, SUSAN, J., MS.,**

Mailing Address 3418 E SUNCREST CT

City  
PHOENIX

State  
AZ

Zip Code  
85044-3506

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRAFFICADE

Occupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

431.78

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27666717**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1978 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, CHARLES, , ,**

Mailing Address 4 LOS ARBOLES CT.

City  
DALLASState  
TXZip Code  
75230-3052FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1486.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664623**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, FRANK, , , III**

Mailing Address 457 AVONDALE DR.

City  
BRANSONState  
MOZip Code  
65616-3485FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666595**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, JEANNETTE, , ,**

Mailing Address 873 CRESTVIEW CIRCLE

City  
FORT LAUDERDALEState  
FLZip Code  
33327-1847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

562.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665354**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

212.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1979 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, JEANNETTE, , ,**

Mailing Address 873 CRESTVIEW CIRCLE

City  
FORT LAUDERDALEState  
FLZip Code  
33327-1847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665356**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, JEANNETTE, , ,**

Mailing Address 873 CRESTVIEW CIRCLE

City  
FORT LAUDERDALEState  
FLZip Code  
33327-1847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665357**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, JOHN, W., MR.,**

Mailing Address 3927 N FLORENCE BLVD

City  
FLORENCEState  
AZZip Code  
85132-8403FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

338.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666463**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1980 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, KARON, , ,**

Mailing Address 1345 165TH ST

City  
FORT SCOTTState  
KSZip Code  
66701-8344FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.14

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

Transaction ID : SA11A.27665154

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, KARON, , ,**

Mailing Address 1345 165TH ST

City  
FORT SCOTTState  
KSZip Code  
66701-8344FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.14

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

Transaction ID : SA11A.27665196

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, KARON, , ,**

Mailing Address 1345 165TH ST

City  
FORT SCOTTState  
KSZip Code  
66701-8344FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.14

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

Transaction ID : SA11A.27665200

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1981 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, PAT, A., ,**

Mailing Address 5471 CEDAR BRANCH CIR.

City  
INDIANAPOLISState  
INZip Code  
46268-3925FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.99

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665409**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, PAT, A., ,**

Mailing Address 5471 CEDAR BRANCH CIR.

City  
INDIANAPOLISState  
INZip Code  
46268-3925FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.99

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665420**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, PAT, A., ,**

Mailing Address 5471 CEDAR BRANCH CIR.

City  
INDIANAPOLISState  
INZip Code  
46268-3925FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.99

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665783**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1982 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOYCE, RICHARD, , ,**Mailing Address 1350 E NORTH ST  
LOT 84City  
CROWN POINTState  
INZip Code  
46307-6400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665826**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAVAL, KATHLEEN, , ,**

Mailing Address 1596 WANTAGH AVE.

City  
WANTAGHState  
NYZip Code  
11793-3902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665731**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEARNEY, JOYCE, G., MRS.,**

Mailing Address 7 BATTLE RD

City  
HAMPTONState  
VAZip Code  
23666-1403FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664744**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1983 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667108**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KELEDJIAN, EDWARD, , ,**

Mailing Address 29 KINGSBOROUGH CV

City  
INVERNESSState  
ILZip Code  
60010-5432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.40

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666387**

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KERNS, DIANA, , ,**

Mailing Address 3529 CHELLEN DRIVE

City  
FARMERS BRANCHState  
TXZip Code  
75234-6621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

211.27

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666053**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1984 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KIBBY, LEROY, , ,**

Mailing Address 4816 S 154TH PLZ

City  
OMAHAState  
NEZip Code  
68137-5165FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665126**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIRBY, ERROL, , MR.,**

Mailing Address 2895 TOBIANO DR.

City  
RENOState  
NVZip Code  
89521-8022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

797.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666186**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KIRKHAM, ROGER, , ,**

Mailing Address 3860 BOULDER PATCH

City  
RENOState  
NVZip Code  
89511-3261FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

512.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665374**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.05

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1985 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLEIN, MICHAEL, F., MR.,**

Mailing Address 5220 KLEE MILL RD S

City  
SYKESVILLE

State  
MD

Zip Code  
21784-9257

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CHARLES A. KLEIN AND SONS

Occupation (for Individual)  
MECHANICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4330.25

Date of Receipt

**02** / **09** / **2025**

**Transaction ID : SA11A.27666159**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KLEIN, MICHAEL, F., MR.,**

Mailing Address 5220 KLEE MILL RD S

City  
SYKESVILLE

State  
MD

Zip Code  
21784-9257

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CHARLES A. KLEIN AND SONS

Occupation (for Individual)  
MECHANICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4330.25

Date of Receipt

**02** / **09** / **2025**

**Transaction ID : SA11A.27666170**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLEIN, MICHAEL, F., MR.,**

Mailing Address 5220 KLEE MILL RD S

City  
SYKESVILLE

State  
MD

Zip Code  
21784-9257

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CHARLES A. KLEIN AND SONS

Occupation (for Individual)  
MECHANICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4330.25

Date of Receipt

**02** / **09** / **2025**

**Transaction ID : SA11A.27667233**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1986 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNAPP, FRANKLIN, P., ,**

Mailing Address 10715 PARKGATE DR

City  
NOKESVILLEState  
VAZip Code  
20181-2921FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.26

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665095**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNIGHT, DAVID, , ,**

Mailing Address 758 FAIRMONT STREET NW UNIT 2

City  
WASHINGTONState  
DCZip Code  
20001-3814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FEDERAL GOVERNMENTOccupation (for Individual)  
STRATEGIC ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665779**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNOTT, DANIEL, , ,**

Mailing Address 188 VISTA TERRAZZA ST

City  
HENDERSONState  
NVZip Code  
89011-2808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666175**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

327.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1987 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNOWLES, KAREN, , ,**

Mailing Address 308 GRAVES DRIVE

City  
FORESTState  
VAZip Code  
24551-2622FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTRA HEALTHOccupation (for Individual)  
SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

794.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665144

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNOWLES, KAREN, , ,**

Mailing Address 308 GRAVES DRIVE

City  
FORESTState  
VAZip Code  
24551-2622FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTRA HEALTHOccupation (for Individual)  
SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

794.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665480

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNOWLES, KAREN, , ,**

Mailing Address 308 GRAVES DRIVE

City  
FORESTState  
VAZip Code  
24551-2622FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTRA HEALTHOccupation (for Individual)  
SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

794.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666757

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

64.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1988 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNOWLES, MARSHALL, F., MR.,**

Mailing Address 588 MOUNT CARMEL RD

City  
CULLODENState  
GAZip Code  
31016-6134FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CARPENTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667283**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNUITSEN, SHIRLEY, , ,**

Mailing Address 1149 STANTON SHADOW LN

City  
APOPKAState  
FLZip Code  
32712-5493FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665350**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNUITSON, TERRY, , ,**

Mailing Address 1562 EDGEWOOD DRIVE

City  
LODIState  
CAZip Code  
95240-0453FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667089**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.54



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1989 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665324

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666350

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666354

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1990 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KONYICSAK, LASZLO, , ,**

Mailing Address 205 CAMPSITE RD

City  
ROSCOEState  
NYZip Code  
12776-6577FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666644

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRESSGAGER, CINDY, , ,**

Mailing Address 419 CROCKETT STREET

City  
CHANNELVIEWState  
TXZip Code  
77530-4323FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667146

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KROUGH, DAVID, , ,**

Mailing Address 12905 QUAIL RIDGE

City  
LEES SUMMITState  
MOZip Code  
64086-9450FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665676

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

235.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1991 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KRUEGER, NANCY, L., MRS.,**

Mailing Address 7105 SYLVAN LN

City  
ANDERSONState  
CAZip Code  
96007-9536FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.60

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665545**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KURTI, S., CAROL, ,**

Mailing Address 934 COWEE SCHOOL RD.

City  
FRANKLINState  
NCZip Code  
28734-4524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.68

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665099**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KURTI, S., CAROL, ,**

Mailing Address 934 COWEE SCHOOL RD.

City  
FRANKLINState  
NCZip Code  
28734-4524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

408.68

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665202**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1992 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KURTI, S., CAROL, ,**

Mailing Address 934 COWEE SCHOOL RD.

City  
FRANKLINState  
NCZip Code  
28734-4524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666932**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KURZET, ANNE, L., MS.,**

Mailing Address 33762 VALLE ROAD

City  
SAN JUAN CAPISTRANState  
CAZip Code  
92675-4816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665259**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LALONDE, RICHARD , , ,**

Mailing Address 3332 NW 47TH CT

City  
OCALAState  
FLZip Code  
34482-8322FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

938.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665935**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1993 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LALONDE, RICHARD , , ,**

Mailing Address 3332 NW 47TH CT

City  
OCALAState  
FLZip Code  
34482-8322FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

938.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667353**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAMB, FRANK, , ,**

Mailing Address 2346WEST COLLEGE AVE

City

SANTA ROSA

State

CA

Zip Code

95401-4951

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666612**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAMPING, DOUG, R., MR.,**

Mailing Address 1433 SOUTH 35 EAST

City

FARMINGTON

State

UT

Zip Code

84025-2004

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UDCOccupation (for Individual)  
CO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

494.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665752**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1994 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.13

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666959**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.13

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666963**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.13

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666973**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1995 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANPHEAR, JEFF, , ,**

Mailing Address P.O. BOX 488

City  
JEWETT CITYState  
CTZip Code  
06351-0488FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NOREASTEROccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.10

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665957**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANTZ, IRENE, L., ,**

Mailing Address 8175 W FARM ROAD 168

City  
REPUBLICState  
MOZip Code  
65738-9327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.71

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665081**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667440**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1996 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAWRY, GEORDIE, , ,**

Mailing Address 21511 RUSHFORD DRIVE

City  
LAKE FORESTState  
CAZip Code  
92630-6549FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665567**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAYCOCK, JAMES, , ,**

Mailing Address 7628 GANNON AVENUE

City  
UNIVERSITY CITYState  
MOZip Code  
63130-2819FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENTERPRISEOccupation (for Individual)  
PART TIME DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666332**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAYO, LEWIS, DANIEL, MR., SR.**

Mailing Address 2316 W VINE ST

City  
LODIState  
CAZip Code  
95242-3727FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
H&R BLOCK TAX GROUPOccupation (for Individual)  
ENROLLED AGENT/TAX PREPARATIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.95

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665996**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1997 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667195**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LESHAN, KIMBERLY, , ,**

Mailing Address 28745 VILLAGE LN

City  
FARMINGTON HILLSState  
MIZip Code  
48334-3153FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.10

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666187**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LESHAN, KIMBERLY, , ,**

Mailing Address 28745 VILLAGE LN

City  
FARMINGTON HILLSState  
MIZip Code  
48334-3153FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.10

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666199**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1998 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEVY, RICHARD, P., DR.,**

Mailing Address 2785 S MAJESTIC AVE

City  
YUMAState  
AZZip Code  
85365-1170FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SOUTHWEST ONCOLOGY CENTERSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665970**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666584**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINTON, WILLARD, , ,**

Mailing Address 1136 SOUTH QUAIL CREEK ROAD

City  
SKIATOOKState  
OKZip Code  
74070-1747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

410.89

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666402**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1999 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOUGHNEY, ROBERT, D., MR.,**

Mailing Address 2316 GOLDSMITH ST

City  
HOUSTONState  
TXZip Code  
77030-1130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOUGHNEY CONSULTING INC.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665408**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOUGHNEY, ROBERT, D., MR.,**

Mailing Address 2316 GOLDSMITH ST

City  
HOUSTONState  
TXZip Code  
77030-1130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOUGHNEY CONSULTING INC.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665434**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOWRY, FRED, L., MR., SR.**

Mailing Address 967 PIONEER RD.

City  
DRAPERState  
UTZip Code  
84020-9334FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOWRY & ASSOCIATESOccupation (for Individual)  
SMALL BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1339.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665710**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

332.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2000 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOWRY, FRED, L., MR., SR.**

Mailing Address 967 PIONEER RD.

City  
DRAPERState  
UTZip Code  
84020-9334FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOWRY & ASSOCIATESOccupation (for Individual)  
SMALL BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1339.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666259**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUSK, RUSSELL, , ,**

Mailing Address 1412 8TH STREET

City  
SHALLOWATERState  
TXZip Code  
79363-5133FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667301**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUTHER, ROBERT, , MR.,**

Mailing Address 2201 LAUREL OAK DRIVE

City  
VALENCIAState  
PAZip Code  
16059-8776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667185**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

404.10

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2001 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LUTSCHG, VIVIAN, , MRS.,

Mailing Address 2400 MAPLE ST.

City  
CHADRONState  
NEZip Code  
69337-9369FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664896

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUTSCHG, VIVIAN, , MRS.,

Mailing Address 2400 MAPLE ST.

City  
CHADRONState  
NEZip Code  
69337-9369FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664901

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LYNCH, JEFFREY, , ,

Mailing Address 5922 MAPLESHADE LN

City  
DALLASState  
TXZip Code  
75252-2353FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LYNCH LAW FIRMOccupation (for Individual)  
TRIAL LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

332.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665029

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2002 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LYNCH, JEFFREY, , ,**

Mailing Address 5922 MAPLESHADE LN

City  
DALLASState  
TXZip Code  
75252-2353FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LYNCH LAW FIRMOccupation (for Individual)  
TRIAL LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.07

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

Transaction ID : SA11A.27665041

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LYONS, GEORGE, , ,**

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534-5242FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1658.27

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

Transaction ID : SA11A.27666213

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LYSTER, ELOISE, , ,**

Mailing Address P.O. BOX 28

City  
BENDState  
ORZip Code  
97709-0028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

392.34

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

Transaction ID : SA11A.27665805

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2003 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MADER, VIRGINIA, , ,**

Mailing Address 1805 SUNRIDGE AVENUE

City  
GILLETTEState  
WYZip Code  
82718-7665FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.57

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664699**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAHADKAR, MOHAN, , ,**

Mailing Address 4 ARIANA COURT

City  
OYSTER BAYState  
NYZip Code  
11771-3417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.16

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665506**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANCHESTER, PETER, , ,**

Mailing Address 4967 BEACON PLACE

City  
FREELANDState  
WAZip Code  
98249-9689FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.76

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665803**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2004 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARETT, TOM, M., MR.,**

Mailing Address 1319 SELLERS ST

City  
PHILADELPHIAState  
PAZip Code  
19124-3627FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665489**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, MARYANNE, , ,**

Mailing Address 1455 N WOODLAND AVE.

City  
TUCSONState  
AZZip Code  
85712-4142FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667437**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

832.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665055**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.23



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2005 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665216**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATHESON, MARILYN, , ,**

Mailing Address 1356 JACKSON ST

City  
BELOITState  
WIZip Code  
53511-5914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667257**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCRAY, GREGORY, C., MR.,**

Mailing Address 4604 YELLOW ROSE TRAIL

City  
AUSTINState  
TXZip Code  
78749-1670FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

407.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667037**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2006 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCDANIEL, RON, , MR.,**

Mailing Address 509 HARDWOOD CIR

City  
ORLANDOState  
FLZip Code  
32828-8290FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.08

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666091**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCELREATH, JAMES, , ,**

Mailing Address 1701SHADYDIDE

City  
EAST LIVERPOOLState  
OHZip Code  
43920-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.06

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665468**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCELREATH, JAMES, , ,**

Mailing Address 1701SHADYDIDE

City  
EAST LIVERPOOLState  
OHZip Code  
43920-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

393.06

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665478**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2007 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCELREATH, JAMES, , ,**

Mailing Address 1701SHADYDIDE

City  
EAST LIVERPOOLState  
OHZip Code  
43920-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665483**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCFADDEN, ROYCE, , MR.,**

Mailing Address 1250 FM 168

City  
OLTONState  
TXZip Code  
79064-2118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666902**

Amount of Each Receipt this Period

4.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCGAVOCK, VICKI, , ,**

Mailing Address 4004 109TH ST

City  
LUBBOCKState  
TXZip Code  
79423-0880FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

618.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666690**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.42

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2008 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MERICLE, DANIEL, V., , SR.**

Mailing Address 11420 SAN JACINTO AVE NE

City  
ALBUQUERQUEState  
NMZip Code  
87112-5527FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665917**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MESSINA, JILL, A., ,**

Mailing Address 1374 MIDLAND AVE APT 215

City  
BRONXVILLEState  
NYZip Code  
10708-6850FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666037**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEYERS-GLYDA, DONNA, , MS.,**

Mailing Address 7512 VALHALLA DRIVE

City  
MAUMEEState  
OHZip Code  
43537-9512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SERENITY REALTYOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667422**

Amount of Each Receipt this Period

2.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

184.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2009 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIKEL, BILLY, , ,**

Mailing Address 11 EAGLE STREET NORTHEAST

City  
FORT WALTON BEACHState  
FLZip Code  
32547-1705FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666879

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIKULICH, JOHN, , , II**

Mailing Address 4120 PURPLE RIDGE CT

City  
LAS VEGASState  
NVZip Code  
89129-5484FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666035

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, ANNE, , ,**

Mailing Address 6 RONNA RD

City  
GLOUCESTERState  
MAZip Code  
01930-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1006.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664826

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2010 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, ANNE, , ,**

Mailing Address 6 RONNA RD

City  
GLOUCESTERState  
MAZip Code  
01930-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1006.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665246**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELLState  
NMZip Code  
88201-8659FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664975**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELLState  
NMZip Code  
88201-8659FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666032**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2011 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.52

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666725**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.52

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666731**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

695.52

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666735**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27.28

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2012 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAM

State  
AL

Zip Code  
35213-3606

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

**Transaction ID : SA11A.27666743**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOK, LIMING, , ,**

Mailing Address 29726 COJAK CIRCLE

City  
FAIR OAKS RANCH

State  
TX

Zip Code  
78015-4521

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

**Transaction ID : SA11A.27667414**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOK, LIMING, , ,**

Mailing Address 29726 COJAK CIRCLE

City  
FAIR OAKS RANCH

State  
TX

Zip Code  
78015-4521

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

395.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

**Transaction ID : SA11A.27667416**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

44.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2013 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOK, LIMING, , ,**

Mailing Address 29726 COJAK CIRCLE

City  
FAIR OAKS RANCHState  
TXZip Code  
78015-4521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667418**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOK, LIMING, , ,**

Mailing Address 29726 COJAK CIRCLE

City  
FAIR OAKS RANCHState  
TXZip Code  
78015-4521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667419**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONKE, SHEILA, , MS.,**

Mailing Address 12230 COUNTY ROAD P1

City  
NICKERSONState  
NEZip Code  
68044-2595FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AGRICULTURE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

348.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666638**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2014 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLAND

State  
SC

Zip Code  
29492-7463

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

**02 / 09 / 2025**

**Transaction ID : SA11A.27666028**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLAND

State  
SC

Zip Code  
29492-7463

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

**02 / 09 / 2025**

**Transaction ID : SA11A.27667161**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOODY, EVAN, E., MR.,**

Mailing Address 26 CHERRY HILLS FARM DR.

City  
ENGLEWOOD

State  
CO

Zip Code  
80113-7165

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
MOODY INSURANCE AGENCY

Occupation (for Individual)  
INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

408.95

Date of Receipt

**02 / 09 / 2025**

**Transaction ID : SA11A.27666724**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

90.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2015 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOORE, MATT, , ,**

Mailing Address 1744 HAROLD RD.

City  
ESCONDIDOState  
CAZip Code  
92026-1840FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HORIZON OXYGENOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665627**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOORE, ROBERT, L., ,**

Mailing Address 13994 NEWBERG

City  
CAT SPRINGState  
TXZip Code  
78933-5237FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666749**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOORE, ROBERT, L., ,**

Mailing Address 13994 NEWBERG

City  
CAT SPRINGState  
TXZip Code  
78933-5237FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666819**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

147.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2016 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORGAN, ELIZABETH, E., MS.,**

Mailing Address 12422 TIMBER HOLLOW

City  
HOUSTONState  
TXZip Code  
77058-1218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665186**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORRILL, PHILIP, J., MR.,**

Mailing Address 40 MT ALPINE PL

City  
CLAYTONState  
CAZip Code  
94517-1501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PGEOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666569**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOSES, GEORGE, L., ,**

Mailing Address 101 NW FORT SILL BLVD

City  
LAWTONState  
OKZip Code  
73507-6611FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

367.30

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666706**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

242.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2017 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOUNTEER, FAYE, , ,**

Mailing Address 9985N 5320 W

City  
HIGHLANDState  
UTZip Code  
84003-3501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666839

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOUNTEER, FAYE, , ,**

Mailing Address 9985N 5320 W

City  
HIGHLANDState  
UTZip Code  
84003-3501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666847

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOUNTEER, FAYE, , ,**

Mailing Address 9985N 5320 W

City  
HIGHLANDState  
UTZip Code  
84003-3501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

529.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666852

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

109.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2018 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664732**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664733**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

955.83

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664734**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2019 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYN

State  
VA

Zip Code  
23936-9412

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27664735**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYN

State  
VA

Zip Code  
23936-9412

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27664737**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYN

State  
VA

Zip Code  
23936-9412

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

955.83

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27664739**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2020 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664740**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664741**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEAT, KAREN, , ,**

Mailing Address 2002 APPLESEED DR

City  
ALLENState  
TXZip Code  
75013-4894FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

816.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666320**

Amount of Each Receipt this Period

60.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.39



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2021 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEAT, KAREN, , ,**

Mailing Address 2002 APPLESEED DR

City  
ALLENState  
TXZip Code  
75013-4894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666349

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, EDWARD, , ,**

Mailing Address 8830 MCAVOY DR.

City  
HOUSTONState  
TXZip Code  
77074-7310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666730

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, KAREN, , ,**

Mailing Address 4304 COCHRAN CHAPEL CIRCLE

City  
DALLASState  
TXZip Code  
75209-2026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667065

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2022 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, KAY, , ,**

Mailing Address 4518. 7TH ST

City  
LUBBOCKState  
TXZip Code  
79416-4713FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.50

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666283**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, PATRICIA, , ,**

Mailing Address 138 SOUTH SALEM DR.

City  
MCDONOUGHState  
GAZip Code  
30253-4768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.92

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667380**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEWELL, LINDA, , ,**

Mailing Address 4324 SUMMER STAR LANE

City  
FORT WORTHState  
TXZip Code  
76244-4934FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

574.03

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666767**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2023 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEWSWANGER, BRIAN, , ,**

Mailing Address 237 MOUNTAIN ST

City  
PHILADELPHIAState  
PAZip Code  
19148-1319FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667287**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NICHOLS, PHIL, , ,**

Mailing Address 407 WEST CORNELL STREET

City  
AVON PARKState  
FLZip Code  
33825-3700FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1266.16

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664756**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NIEMANN, NANCY, , ,**

Mailing Address 18 DOGWOOD RD.

City  
MORRIS PLAINSState  
NJZip Code  
07950-1919FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

853.83

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666897**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2024 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O'NEAL, MARY, , ,**

Mailing Address 218 QUAILWOOD COURT

City  
SWANSBOROState  
NCZip Code  
28584-9751FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.05

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666059**

Amount of Each Receipt this Period

79.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O'DONNELL, MARY, , ,**Mailing Address 1184 LYNETTE DR  
INFO REQUESTEDCity  
LAKE FORESTState  
ILZip Code  
60045-4601FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664763**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'DONNELL, MARY, , ,**Mailing Address 1184 LYNETTE DR  
INFO REQUESTEDCity  
LAKE FORESTState  
ILZip Code  
60045-4601FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664895**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2025 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'DONNELL, MARY, , ,

Mailing Address 1184 LYNETTE DR  
INFO REQUESTEDCity  
LAKE FORESTState  
ILZip Code  
60045-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664905

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'DONNELL, MARY, , ,

Mailing Address 1184 LYNETTE DR  
INFO REQUESTEDCity  
LAKE FORESTState  
ILZip Code  
60045-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664913

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'DONNELL, MARY, , ,

Mailing Address 1184 LYNETTE DR  
INFO REQUESTEDCity  
LAKE FORESTState  
ILZip Code  
60045-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664933

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2026 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OEH, LINDA, , ,**

Mailing Address 1406 POST ROAD

City  
FULLERTONState  
CAZip Code  
92833-2044FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666081**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLIVER, DANIEL, , ,**

Mailing Address 2745 PARKWOOD DR.

City  
QUINCYState  
ILZip Code  
62305-7686FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DANIEL OLIVEROccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666089**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLSON, JAMES, K., MR.,**

Mailing Address 515 16TH AVE N

City  
ONALASKAState  
WIZip Code  
54650-2415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

421.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666523**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

639.10

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2027 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ORPHALI, VERONA, , ,**

Mailing Address 140 CANONWOOD DR.

City  
GLENDALE

State  
CA

Zip Code  
91207-1055

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
HEALTH CARE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.87

Date of Receipt

**02** / **09** / **2025**

**Transaction ID : SA11A.27665660**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

**02** / **09** / **2025**

**Transaction ID : SA11A.27666242**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

**02** / **09** / **2025**

**Transaction ID : SA11A.27666243**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

55.14

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2028 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27666245**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27666249**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27666256**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

20.06



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2029 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAGANINI, KAREN, , MS.,**

Mailing Address 8863 ROBIN LN

City  
KIRTLANDState  
OHZip Code  
44094-9768FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

K&amp;D

Occupation (for Individual)

PROPERTY MANAGEMENT &amp; DEVEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.33

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665455**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAGEL, ANITA, , ,**

Mailing Address 100 NORTH OLIVE STREET

City

SAINT ELMO

State

IL

Zip Code

62458-1443

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

PAGEL FUNERAL HOMES

Occupation (for Individual)

FUNERAL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.58

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667140**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAINTER, GLORIA, , ,**

Mailing Address 2516 BARBADOS DRIVE

City

GAUTIER

State

MS

Zip Code

39553-6762

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666460**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2030 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALERMO, MARK, , ,**

Mailing Address 246 GARFIELD PL

City  
BROOKLYNState  
NYZip Code  
11215-2207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER, INVESTOR, CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666785**

Amount of Each Receipt this Period

4.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARKS, JENNIE, , ,**

Mailing Address 386 W TROXELL RD

City  
OAK HARBORState  
WAZip Code  
98277-7909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665750**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKS, MARTHA, , MS.,**

Mailing Address 2815 SIMONDALE DR.

City  
FORT WORTHState  
TXZip Code  
76109-1255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

895.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665654**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

46.25

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2031 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARKS, MARTHA, , MS.,**

Mailing Address 2815 SIMONDALE DR.

City  
FORT WORTHState  
TXZip Code  
76109-1255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

895.70

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665657**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARKS, MARTHA, , MS.,**

Mailing Address 2815 SIMONDALE DR.

City  
FORT WORTHState  
TXZip Code  
76109-1255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

895.70

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665661**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARSONS, DENISE, , ,**

Mailing Address 1324 COUNTY ROAD 225

City  
BLUFFTONState  
TXZip Code  
78607-3008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665004**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2032 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PATTERSON, BARBARA, , ,**

Mailing Address 2700 SUNRUNNER LANE

City  
GULF BREEZEState  
FLZip Code  
32563-2562FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665535

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PATTERSON, BARBARA, , ,**

Mailing Address 2700 SUNRUNNER LANE

City  
GULF BREEZEState  
FLZip Code  
32563-2562FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665670

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PATTERSON, BARBARA, , ,**

Mailing Address 2700 SUNRUNNER LANE

City  
GULF BREEZEState  
FLZip Code  
32563-2562FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

935.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665682

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2033 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PECORA, SANDRA, J., MRS.,**

Mailing Address 20 EDGEWATER CT

City  
WAKEMANState  
OHZip Code  
44889-9082FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666496**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRIN, CAROL, , MRS.,**

Mailing Address 16 ROCKY COVE RD

City  
LEXINGTONState  
SCZip Code  
29072-9763FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

921.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665107**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERS, ELLIE, , ,**

Mailing Address 302 US HWY 385 NORTH

City  
SEMINOLEState  
TXZip Code  
79360-7119FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARM RANCH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

712.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667404**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2034 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETRONE, DICK, P., ,**

Mailing Address 19958 SW 90TH PLACE

City  
TUALATINState  
ORZip Code  
97062-9494FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666171**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666633**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PINCH, ROBERTA, , ,**

Mailing Address 19407 ROSTROM ROAD

City  
WELSHState  
LAZip Code  
70591-6512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MIGUEZ FUNERAL HOMEOccupation (for Individual)  
SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666721**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2035 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PINKERTON, EILEEN, R., MS.,**

Mailing Address 3340 GREGORY DR W

City  
BILLINGSState  
MTZip Code  
59102-0597FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DECORATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.96

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667431**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666559**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PORTER, RAYMOND, E., MR.,**

Mailing Address 15444 SILVAN GLEN DR.

City  
DUMFRIESState  
VAZip Code  
22025-1012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

408.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667460**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2036 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666355**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667187**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POWELL, SCOTT, , MR.,**

Mailing Address PO BOX 3234

City  
PONTE VEDRA BEACHState  
FLZip Code  
32004-3234FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

518.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666082**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

99.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2037 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRADO, JORGE, A., MR.,**

Mailing Address 630 W VALENCIA MESA DR.

City  
FULLERTONState  
CAZip Code  
92835-4004FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666406**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PREMO, TERRY, , ,**

Mailing Address 1409 EVERGREEN PARK DR. SW - 301

City  
OLYMPIAState  
WAZip Code  
98502-5827FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665047**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666486**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2038 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666491

Amount of Each Receipt this Period

9.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PUERTA, AMANDA, , ,**

Mailing Address 10 GLENBROOK RD

City  
STAMFORDState  
CTZip Code  
06902-2977FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667447

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RADY, PAUL, M., MR.,**

Mailing Address 4 MOCKINGBIRD LN

City  
ENGLEWOODState  
COZip Code  
80113-4813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANTERO RESOURCESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

8901.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666221

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

94.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2039 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAINWATER, DAVID, , ,**

Mailing Address 109 EAST 14TH AVE

City  
CORDELEState  
GAZip Code  
31015-1446FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666439**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAK, HENRY, , ,**

Mailing Address 2 VILLAGE DRIVE

City  
TRUMBULLState  
CTZip Code  
06611-4800FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666309**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RANDALL, HELEN, , ,**

Mailing Address 13249 SW 190TH ST

City  
ROSE HILLState  
KSZip Code  
67133-8519FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665496**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2040 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665959

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665969

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665972

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2041 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAYBORN, KENNETH, , ,**

Mailing Address 507 KYLE LANE NW

City  
CLEVELANDState  
TNZip Code  
37312-6439FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1059.67

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665376**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REILLY, MICHAEL, H., MR.,**

Mailing Address 223 NORTH VAN DIEN AVENUE

City  
RIDGEWOODState  
NJZip Code  
07450-2726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RIDGEWOOD PATHOLOGY GROUP, PAOccupation (for Individual)  
PATHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.05

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665798**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REINHARD, ROSEMARIE, , MR.,**

Mailing Address 2755 FALCON STREET

City  
EAST MEADOWState  
NYZip Code  
11554-4318FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

505.15

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665777**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2042 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REIZOVIC, ROY, , ,**

Mailing Address 8520 SUTTERFIELD DRIVE

City  
COLORADO SPRINGSState  
COZip Code  
80920-6204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664691

Amount of Each Receipt this Period

5.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REIZOVIC, ROY, , ,**

Mailing Address 8520 SUTTERFIELD DRIVE

City  
COLORADO SPRINGSState  
COZip Code  
80920-6204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665037

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RENTOF, PETER, , ,**Mailing Address 235 EAST 22ND STREET  
7DCity  
NEW YORKState  
NYZip Code  
10010-4635FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667348

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

76.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2043 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICCIUTI, LOU RAE, , ,**

Mailing Address 12107 KAMMERER AVENUE

City  
CONNEAUT LAKEState  
PAZip Code  
16316-3941FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.98

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667143**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RICCIUTI, LOU RAE, , ,**

Mailing Address 12107 KAMMERER AVENUE

City  
CONNEAUT LAKEState  
PAZip Code  
16316-3941FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.98

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667351**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICCIUTI, LOU RAE, , ,**

Mailing Address 12107 KAMMERER AVENUE

City  
CONNEAUT LAKEState  
PAZip Code  
16316-3941FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.98

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667352**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

32.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2044 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICE, BRIAN, , ,**

Mailing Address 16420 HARVEST STREET

City  
BAKERSFIELDState  
CAZip Code  
93314-7805FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666958**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RICHTER, GUNTRAM, , MS.,**

Mailing Address 7 VALLEYWOOD CT W

City  
SAINT JAMESState  
NYZip Code  
11780-1013FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666617**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RITCHEY, GREG, , ,**

Mailing Address 5333 53 STREET N

City  
SAINT PETERSBURGState  
FLZip Code  
33709-3735FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPSOccupation (for Individual)  
LETTER CARRIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665571**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.81



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2045 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBERTSMATSUO, MARY, , ,**

Mailing Address 903 WAIHOLO STREET

City  
HONOLULUState  
HIZip Code  
96821-1225FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.40

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665596**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666340**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROONEY, RANDALL, , ,**

Mailing Address 101 ONEILL CT

City  
FOLSOMState  
CAZip Code  
95630-2379FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.48

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664651**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2046 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROONEY, RANDALL, , ,**

Mailing Address 101 ONEILL CT

City  
FOLSOMState  
CAZip Code  
95630-2379FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666552

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROONEY, RANDALL, , ,**

Mailing Address 101 ONEILL CT

City  
FOLSOMState  
CAZip Code  
95630-2379FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666555

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROSE, MARK, , ,**

Mailing Address 7803 NW INDEPENDENCE HWY

City  
ALBANYState  
ORZip Code  
97321-9353FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666920

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

204.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2047 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROSENWALD, NINA, , ,**

Mailing Address 464 HANDS CREEK ROAD

City  
EAST HAMPTONState  
NYZip Code  
11937-3405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667054**

Amount of Each Receipt this Period

198.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROSS, DIANE, M., ,**

Mailing Address 9111 NICKELS BLVD

City  
BOYNTON BEACHState  
FLZip Code  
33436-2765FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.76

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666837**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROSS, DIANE, M., ,**

Mailing Address 9111 NICKELS BLVD

City  
BOYNTON BEACHState  
FLZip Code  
33436-2765FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.76

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666842**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

238.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2048 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROSS, DIANE, M., ,**

Mailing Address 9111 NICKELS BLVD

City  
BOYNTON BEACHState  
FLZip Code  
33436-2765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666844**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROSS, DIANE, M., ,**

Mailing Address 9111 NICKELS BLVD

City  
BOYNTON BEACHState  
FLZip Code  
33436-2765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666846**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROSS, DIANE, M., ,**

Mailing Address 9111 NICKELS BLVD

City  
BOYNTON BEACHState  
FLZip Code  
33436-2765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666850**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2049 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664833**

Amount of Each Receipt this Period

1.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665042**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665907**

Amount of Each Receipt this Period

1.56

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2050 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.2766016

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667099

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667464

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2051 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667313

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664929

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665018

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2052 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665026**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665063**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665266**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5.07



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2053 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SACHNOFF, BRUCE, , ,**

Mailing Address 126 FIELD CLUB ROAD

City  
PITTSBURGHState  
PAZip Code  
15238-2238FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

694.61

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666861**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SADAR, AMELIA, , MS.,**

Mailing Address 1604STONE MANSION DR.

City  
SEWICKLEYState  
PAZip Code  
15143-8601FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.91

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666756**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SALONIA, DAVID, , ,**

Mailing Address 42 CLOCK SHOP DR.

City  
BERLINState  
CTZip Code  
06037-3321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SIMSBURY BOEOccupation (for Individual)  
STEM TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665537**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2054 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANCHEZ, JOSE, , ,**

Mailing Address 10606 WAYNE AVENUE

City  
LUBBOCKState  
TXZip Code  
79424-7417FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

XFAB

Occupation (for Individual)

MFG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.60

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666379**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665878**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHATTYN, JOHN, , MR.,**

Mailing Address 129 CROCKETT DR.

City  
KERRVILLEState  
TXZip Code  
78028-8114FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1214.14

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666613**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

128.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2055 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHATTYN, JOHN, , MR.,**

Mailing Address 129 CROCKETT DR.

City  
KERRVILLEState  
TXZip Code  
78028-8114FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666962**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHIEFERECKE, BETTY, , ,**

Mailing Address 2421 SWQUEENSWAY

City  
TOPEKAState  
KSZip Code  
66614-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666273**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLAGETER, FRANK, , MR.,**

Mailing Address 4420 N.E. 28TH AVENUE

City  
POMPANO BEACHState  
FLZip Code  
33064-7222FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666876**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2056 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665325**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHLOUGH, JAMES, , ,**

Mailing Address 3810 CHURCH HILL

City  
CRYSTAL LAKEState  
ILZip Code  
60014-6511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664656**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLOUGH, JAMES, , ,**

Mailing Address 3810 CHURCH HILL

City  
CRYSTAL LAKEState  
ILZip Code  
60014-6511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

597.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664663**

Amount of Each Receipt this Period

22.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

34.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2057 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLOUGH, JAMES, , ,**

Mailing Address 3810 CHURCH HILL

City  
CRYSTAL LAKEState  
ILZip Code  
60014-6511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667315**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHNEEGASS, GEORGE, F., MR.,**

Mailing Address 3675 MOUNTAIN DR.

City  
COLORADO SPRINGSState  
COZip Code  
80918-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

634.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664970**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHROEDER, STEPHEN, , ,**

Mailing Address 20722 348TH STREET

City  
TAYLORS FALLSState  
MNZip Code  
55084-2848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

912.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664773**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2058 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, JOAN, C., MS.,**

Mailing Address 5094 TEN MILE PL.

City  
CASTLE ROCKState  
COZip Code  
80108-8837FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.53

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664599**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEIBERT, ANNE MARIE, , ,**

Mailing Address 7840 BOSTON STATE ROAD

City  
HAMBURGState  
NYZip Code  
14075-7349FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.50

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666885**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SERBIA, VICTORIA, C., ,**

Mailing Address 4304 HORACE DR. NW

City  
HUNTSVILLEState  
ALZip Code  
35816-3518FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.49

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667047**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2059 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHAW, DAVID, L., DR.,**

Mailing Address 225 COLEWOOD WAY

City  
ATLANTAState  
GAZip Code  
30328-2922FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.25

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667094**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHAYS, LORRAINE, , ,**

Mailing Address 14659 CANALVIEW DRIVE APT A

City  
DELRAY BEACHState  
FLZip Code  
33484-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.21

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664890**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHAYS, LORRAINE, , ,**

Mailing Address 14659 CANALVIEW DRIVE APT A

City  
DELRAY BEACHState  
FLZip Code  
33484-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

483.21

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667010**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.46

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2060 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHEDLOCK, JOHN, , ,

Mailing Address 10089 IRON MOUNTAIN CT

City  
RANCHO CUCAMONGAState  
CAZip Code  
91737-6831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666216

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHERROD, CLIFFORD, , ,

Mailing Address 28900 SOUTH SONCY ROAD

City  
CANYONState  
TXZip Code  
79015-6420FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665842

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHOCKLEY, SANDRA, , ,

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665890

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.95



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2061 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHRINER, ROBERT, , ,**

Mailing Address 519 MIAMI CLUB CT

City  
MISHAWAKAState  
INZip Code  
46544-2675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1435.65

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665074**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHRINER, ROBERT, , ,**

Mailing Address 519 MIAMI CLUB CT

City  
MISHAWAKAState  
INZip Code  
46544-2675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1435.65

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665759**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHRINER, ROBERT, , ,**

Mailing Address 519 MIAMI CLUB CT

City  
MISHAWAKAState  
INZip Code  
46544-2675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1435.65

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665992**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2062 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHRINER, ROBERT, , ,**

Mailing Address 519 MIAMI CLUB CT

City  
MISHAWAKAState  
INZip Code  
46544-2675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1435.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666821**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHRINER, ROBERT, , ,**

Mailing Address 519 MIAMI CLUB CT

City  
MISHAWAKAState  
INZip Code  
46544-2675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1435.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666834**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHUGER, JILL, , ,**

Mailing Address N7756 BUSHEY RD

City  
TREGOState  
WIZip Code  
54888-9327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667014**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2063 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIMPSON, BARBRA, , ,**

Mailing Address 872 5TH STREET

City  
MANHATTAN BEACHState  
CAZip Code  
90266-6664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667167

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, KELLY, , ,**

Mailing Address 5800 GRASSMERE LANE

City  
DALLASState  
TXZip Code  
75205-4624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666075

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, KELLY, , ,**

Mailing Address 5800 GRASSMERE LANE

City  
DALLASState  
TXZip Code  
75205-4624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666810

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2064 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, LINDA, NESTOR, ,**Mailing Address 700 PENN CENTER BLVD APT 403  
LAUREL VILLAGE APTSCity  
PITTSBURGHState  
PAZip Code  
15235-5916FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665160**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, MARY, L., ,**

Mailing Address 2939 QUENLEY ST

City

SAINT CHARLES

State

MO

Zip Code

63301-

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665965**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, RON, , ,**

Mailing Address P.O. BOX 898

City

BANNER ELK

State

NC

Zip Code

28604-0898

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1028.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666524**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2065 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, RON, , ,**

Mailing Address P.O. BOX 898

City  
BANNER ELKState  
NCZip Code  
28604-0898FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1028.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666535**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666431**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664720**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2066 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPAETH, EDMUND, , ,**

Mailing Address 26536 LOVE LN

City  
RAMONAState  
CAZip Code  
92065-4822FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667410

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPAETH, EDMUND, , ,**

Mailing Address 26536 LOVE LN

City  
RAMONAState  
CAZip Code  
92065-4822FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667411

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665776

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

71.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2067 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPANN, CYNTHIA, , MRS.,

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665787

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPANN, CYNTHIA, , MRS.,

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665795

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPANN, CYNTHIA, , MRS.,

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665797

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2068 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665804**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665812**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STALNAKER, BEN, , DR.,**

Mailing Address 10424 TAM O SHANTER RD

City  
PENSACOLAState  
FLZip Code  
32514-8305FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665883**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.21



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2069 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STANLEY, ERLA , , ,**

Mailing Address 1979 E PIN HIGH DR

City  
FRESNOState  
CAZip Code  
93730-7079FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.52

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665301**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664789**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

776.13

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666534**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2070 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STERN, STEVEN, , ,**

Mailing Address 184 BRADLEY PLACE

City  
PALM BEACHState  
FLZip Code  
33480-3705FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666882**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STIFEL, JOHN, , ,**

Mailing Address 2253 DEBLIN DR.

City  
CINCINNATIState  
OHZip Code  
45239-5609FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.04

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665619**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STUARD, KATHRYN, , ,**

Mailing Address 1140 N US HWY 377

City  
JUNCTIONState  
TXZip Code  
76849-6537FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

357.61

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664845**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

256.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2071 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STUDINKA, JOYCE, , ,**

Mailing Address 145 WOODMONT DR

City  
BIRMINGHAMState  
ALZip Code  
35209-6627FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.38

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665987**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STURGILL, LARRY, , ,**

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665573**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUHR, J., NICHOLAS, MR.,**

Mailing Address 2006 YELLOWSTONE DR

City  
INDIAN LANDState  
SCZip Code  
29707-3536FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

276.98

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667284**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

18.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2072 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SURATT, JAMES, , ,**

Mailing Address 3411 MELROSE DR.

City  
CLARKSVILLEState  
TNZip Code  
37042-4638FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665267**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUTAY, CAROL, , ,**

Mailing Address 9327 CYPRESS BEND DR.

City  
TAMPAState  
FLZip Code  
33647-2553FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.88

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666792**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SWIERS, THOMAS, , ,**

Mailing Address 1161 RANDOLPH RD

City  
MCLEANState  
VAZip Code  
22101-2961FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
US GOVTOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.26

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665133**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

244.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2073 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TARR, ANNE, , ,**

Mailing Address 13306 SOUTHWALK

City  
SAN ANTONIOState  
TXZip Code  
78232-4843FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

987.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665581

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THIELEN, THEO, , ,**

Mailing Address 509 8TH ST W

City  
PARK RAPIDSState  
MNZip Code  
56470-1375FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THIELEN MOTORS INC.Occupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664864

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THIELEN, THEO, , ,**

Mailing Address 509 8TH ST W

City  
PARK RAPIDSState  
MNZip Code  
56470-1375FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THIELEN MOTORS INC.Occupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

427.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664867

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

39.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2074 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THIELEN, THEO, , ,**

Mailing Address 509 8TH ST W

City  
PARK RAPIDSState  
MNZip Code  
56470-1375FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THIELEN MOTORS INC.Occupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664869

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THIELEN, THEO, , ,**

Mailing Address 509 8TH ST W

City  
PARK RAPIDSState  
MNZip Code  
56470-1375FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THIELEN MOTORS INC.Occupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27664874

Amount of Each Receipt this Period

18.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, BILLY, , ,**

Mailing Address P O BOX 1346

City  
MONTGOMERYState  
TXZip Code  
77356-1346FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

430.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665227

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

28.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2075 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, BILLY, , ,**

Mailing Address P O BOX 1346

City  
MONTGOMERYState  
TXZip Code  
77356-1346FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665336

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TIMBROOK, MARILYN, , ,**

Mailing Address 4550 FRINGETREE D

City  
MURRELLS INLETState  
SCZip Code  
29576-4356FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665495

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TIMBROOK, MARILYN, , ,**

Mailing Address 4550 FRINGETREE D

City  
MURRELLS INLETState  
SCZip Code  
29576-4356FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667080

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

134.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2076 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRANZOW, FRANK, H., MR.,**

Mailing Address P.O. BOX 304

City  
RED FE LKSState  
COZip Code  
80545-0304FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667044**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TUKE, THOMAS, , ,**

Mailing Address 19 HAYFIELD WAY

City  
PITTSFORDState  
NYZip Code  
14534-4621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665689**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TUMLINSON, JUDY, , ,**

Mailing Address 5946 EAST BRIARWOOD CIRCLE

City  
CENTENNIALState  
COZip Code  
80112-1022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

329.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664746**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2077 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TUMLINSON, JUDY, , ,**

Mailing Address 5946 EAST BRIARWOOD CIRCLE

City  
CENTENNIALState  
COZip Code  
80112-1022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.10

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664748**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. UMBARGER, BRENDA, L., ,**

Mailing Address P.O. BOX 1774

City  
FRITCHState  
TXZip Code  
79036-1774FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.56

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665019**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. UNDERWOOD, BARBARA, , ,**

Mailing Address 700 CRESTVIEW DRIVE

City  
WOOD RIVERState  
ILZip Code  
62095-3378FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

689.76

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664820**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2078 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. URREIZTIETA, IREL, , ,**

Mailing Address 180 KODIAK ST

City  
MORRO BAYState  
CAZip Code  
93442-3016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.55

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27664594**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAN SANT, BILL, , ,**

Mailing Address 85050 LAKESHORE DR.

City  
BAYFIELDState  
WIZip Code  
54814-4506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TJM CAPITAL PARTNERSOccupation (for Individual)  
OPERATING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.53

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666986**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN SANT, BILL, , ,**

Mailing Address 85050 LAKESHORE DR.

City  
BAYFIELDState  
WIZip Code  
54814-4506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TJM CAPITAL PARTNERSOccupation (for Individual)  
OPERATING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.53

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666990**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2079 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN SANT, BILL, , ,**

Mailing Address 85050 LAKESHORE DR.

City  
BAYFIELDState  
WIZip Code  
54814-4506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TJM CAPITAL PARTNERSOccupation (for Individual)  
OPERATING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666996

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VASEK, GARY, R., MR.,**

Mailing Address 6387 ASHCROFT DR.

City  
COLORADO SPRINGSState  
COZip Code  
80918-3241FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27665578

Amount of Each Receipt this Period

20.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAVKEN, SHERI, , ,**

Mailing Address 39140 GRAY SQUIRREL RD.

City  
TEMECULAState  
CAZip Code  
92592-9071FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666168

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.74

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2080 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VERPLANCK, JAMES, S., MR.,**

Mailing Address 3525 BRIDGEFIELD DR.

City  
LAKELAND

State  
FL

Zip Code  
33803-5912

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.95

Date of Receipt

02 / 09 / 2025

**Transaction ID : SA11A.27665730**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VERPLANCK, JAMES, S., MR.,**

Mailing Address 3525 BRIDGEFIELD DR.

City  
LAKELAND

State  
FL

Zip Code  
33803-5912

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.95

Date of Receipt

02 / 09 / 2025

**Transaction ID : SA11A.27666411**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VILLABONA, MARTHA, , ,**

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMI

State  
FL

Zip Code  
33143-8048

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

02 / 09 / 2025

**Transaction ID : SA11A.27666639**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

73.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2081 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667221**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27667274**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VOELTZ, SUSAN, , ,**

Mailing Address 3180 N TOUCHMARK BLVD #325

City  
PRESCOTTState  
AZZip Code  
86301-6019FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665467**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2082 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALDEN, JAMES, A., ,**

Mailing Address 10404 BRIARWOOD CIR

City  
GREENVILLEState  
TXZip Code  
75402-3300FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.79

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665973**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKERSMITH, NANCY, , ,**

Mailing Address 6827 WINKLE LANE

City  
CANYONState  
MNZip Code  
55717-8712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666083**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALKER, PATRICIA, V., MS.,**

Mailing Address 1470 RIVERVIEW DR.

City  
LEWISPORTState  
KYZip Code  
42351-2434FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

319.65

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665741**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2083 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALKINGTON, PAT, , ,**

Mailing Address 11765 N 135TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-3633FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665701**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALLS, DIANE JANE, , ,**

Mailing Address 1882 VISTA HILLS DR.

City  
NAVASOTAState  
TXZip Code  
77868-6966FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665163**

Amount of Each Receipt this Period

21.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAREHAM, WILLIAM, R., ,**

Mailing Address 206 ARNOLD AVENUE

City  
MCKEESPORTState  
PAZip Code  
15132-7507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666335**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2084 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WAREHAM, WILLIAM, R., ,**

Mailing Address 206 ARNOLD AVENUE

City  
MCKEESPORTState  
PAZip Code  
15132-7507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

Transaction ID : SA11A.27666342

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WAREHAM, WILLIAM, R., ,**

Mailing Address 206 ARNOLD AVENUE

City  
MCKEESPORTState  
PAZip Code  
15132-7507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

Transaction ID : SA11A.27666347

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAREHAM, WILLIAM, R., ,**

Mailing Address 206 ARNOLD AVENUE

City  
MCKEESPORTState  
PAZip Code  
15132-7507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

Transaction ID : SA11A.27666351

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.20



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2085 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WAREHAM, WILLIAM, R., ,**

Mailing Address 206 ARNOLD AVENUE

City  
MCKEESPORTState  
PAZip Code  
15132-7507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666357**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WAREHAM, WILLIAM, R., ,**

Mailing Address 206 ARNOLD AVENUE

City  
MCKEESPORTState  
PAZip Code  
15132-7507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666361**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAREHAM, WILLIAM, R., ,**

Mailing Address 206 ARNOLD AVENUE

City  
MCKEESPORTState  
PAZip Code  
15132-7507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666374**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2086 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665278**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665739**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.41

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665981**

Amount of Each Receipt this Period

1.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2087 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666562**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666883**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATT, CAROL, , ,**

Mailing Address 1470 RHODE ISLAND ST.

City  
LOVELANDState  
COZip Code  
80538-6831FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.28

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667240**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2088 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEATHERLY, CINDI, , ,**

Mailing Address 4690 MEADOW SPRINGS DRIVE

City  
WATKINSVILLEState  
GAZip Code  
30677-4642FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.16

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666017**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEBB, ROSS, A., MR.,**

Mailing Address 6312 N LE MAI AVE.

City  
CHICAGOState  
ILZip Code  
60646-4828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667117**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEIGAND, CRAIG, , MR.,**

Mailing Address 2289 S ISABELL ST

City  
LAKEWOODState  
COZip Code  
80228-6460FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.43

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665838**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2089 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITE, SHIRLEY, LEE, MS.,**

Mailing Address 807 BRAZOS BEND DR.

City  
CEDAR PARKState  
TXZip Code  
78613-7505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27664904**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WICKER, DUANE, , MR.,**

Mailing Address 4447 LAVENDER LN

City  
PAHRUMPState  
NVZip Code  
89061-0135FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666538**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMS, JIMMY, O., MR.,**

Mailing Address 1075 MOTORCOACH DR

City  
POLK CITYState  
FLZip Code  
33868-5113FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

379.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666587**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2090 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, JIMMY, O., MR.,**

Mailing Address 1075 MOTORCOACH DR

City  
POLK CITYState  
FLZip Code  
33868-5113FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.45

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.2766594**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, JEAN, , ,**

Mailing Address 5644 ARAL DRIVE

City  
LAKELANDState  
FLZip Code  
33805-9615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.62

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665524**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, JEAN, , ,**

Mailing Address 5644 ARAL DRIVE

City  
LAKELANDState  
FLZip Code  
33805-9615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.62

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666954**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2091 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, MARGARET, A., MS.,**

Mailing Address 2005 ARTHUR LANE

City  
AUSTINState  
TXZip Code  
78704-3235FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IC2, UT AUSTINOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.74

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665863**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODSON, PAMELA, , ,**

Mailing Address 3534 PLATT DRIVE

City  
LAS VEGASState  
NVZip Code  
89129-6328FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LAGUDI MARKETING GROUPOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27666051**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

348.52

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665204**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

334.15

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2092 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMAN

State  
AL

Zip Code  
35055-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27665207**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMAN

State  
AL

Zip Code  
35055-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27665209**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMAN

State  
AL

Zip Code  
35055-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

348.52

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025

**Transaction ID : SA11A.27665219**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

48.53



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2093 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666597

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27666677

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA11A.27667128

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

178.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2094 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNG, DIANE, , ,**

Mailing Address 1756 PORTAL WAY

City  
SANDYState  
UTZip Code  
84093-6831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665624**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZACCHIO, WENDY, , ,**

Mailing Address 115 SHADY RETREAT TRL

City  
SIX MILEState  
SCZip Code  
29682-3540FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AIHOccupation (for Individual)  
IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27667277**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZAHORIAN, GEORGE, , , III**

Mailing Address 475 WEST GOVERNOR ROAD

City  
HERSHEYState  
PAZip Code  
17033-2217FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COCOA UROLOGY ASSOCIATESOccupation (for Individual)  
SURGEON UROLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.64

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2025**Transaction ID : SA11A.27665809**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2095 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZAHORIAN, GEORGE, , III**

Mailing Address 475 WEST GOVERNOR ROAD

City  
HERSHEYState  
PAZip Code  
17033-2217FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COCOA UROLOGY ASSOCIATESOccupation (for Individual)  
SURGEON UROLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27665851**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZINN, DAVID, D., DR.,**

Mailing Address 720 E 6TH ST

City  
ANNISTONState  
ALZip Code  
36207-5831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NEARMCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2025**Transaction ID : SA11A.27666241**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11C.27667965**

Amount of Each Receipt this Period

86351.91

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2096 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AAMODT, VICKI, , ,**

Mailing Address 18810 RANCHITO DEL RIO DRIVE

City  
SALINASState  
CAZip Code  
93908-9681FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668804

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670819

Amount of Each Receipt this Period

22.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670849

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

128.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2097 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABBOTT, KENNETH, , ,**

Mailing Address 78 HICKORY LN

City  
GREENVILLEState  
KYZip Code  
42345-4105FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.49

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668549**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABBOTT, KENNETH, , ,**

Mailing Address 78 HICKORY LN

City  
GREENVILLEState  
KYZip Code  
42345-4105FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.49

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668552**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABBOTT, KENNETH, , ,**

Mailing Address 78 HICKORY LN

City  
GREENVILLEState  
KYZip Code  
42345-4105FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

328.49

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668553**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2098 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABBOTT, KENNETH, , ,**

Mailing Address 78 HICKORY LN

City  
GREENVILLEState  
KYZip Code  
42345-4105FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27668554**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABBOTT, KENNETH, , ,**

Mailing Address 78 HICKORY LN

City  
GREENVILLEState  
KYZip Code  
42345-4105FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27668558**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABBOTT, KENNETH, , ,**

Mailing Address 78 HICKORY LN

City  
GREENVILLEState  
KYZip Code  
42345-4105FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

328.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27668560**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.91

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2099 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ABBOTT, KENNETH, , ,

Mailing Address 78 HICKORY LN

City  
GREENVILLEState  
KYZip Code  
42345-4105FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668564

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669303

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669306

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2100 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669307

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669310

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669311

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.35



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2101 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669317

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669320

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669325

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

48.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2102 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABUID, JULIA, , ,**

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669334**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAIR, STEFAN, , DR.,**

Mailing Address 8591 SKYLINE DR.

City  
LOS ANGELESState  
CAZip Code  
90046-1042FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668666**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670593**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

41.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2103 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADDEO, WILLIAM, , ,**

Mailing Address 1296 CR 549

City  
HANCEVILLEState  
ALZip Code  
35077-6747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668069**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADKINS, MARY, , ,**

Mailing Address 416 SW 725TH RD

City  
CHILHOWEEState  
MOZip Code  
64733-9229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.61

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669389**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADKINS, MARY, , ,**

Mailing Address 416 SW 725TH RD

City  
CHILHOWEEState  
MOZip Code  
64733-9229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

796.61

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670976**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

210.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2104 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AHN, ROGER, , ,**

Mailing Address 2807 NORTH 160 STREET

City  
OMAHAState  
NEZip Code  
68116-2061FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669736**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AHN, ROGER, , ,**

Mailing Address 2807 NORTH 160 STREET

City  
OMAHAState  
NEZip Code  
68116-2061FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670006**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669194**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2105 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CLAUDIA, , ,**

Mailing Address 1625 WEST LOIS MEADOWS COURT

City  
BLUFFDALEState  
UTZip Code  
84065-5225FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

**Transaction ID : SA11A.27671013**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

**Transaction ID : SA11A.27669345**

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, NANCY, , ,**

Mailing Address 575 72ND ST SE

City  
MONTROSEState  
MNZip Code  
55363-8003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FOOD SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

353.41

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

**Transaction ID : SA11A.27668525**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

154.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2106 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, NANCY, , ,**

Mailing Address 575 72ND ST SE

City  
MONTROSEState  
MNZip Code  
55363-8003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FOOD SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670210

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, NANCY, , ,**

Mailing Address 575 72ND ST SE

City  
MONTROSEState  
MNZip Code  
55363-8003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FOOD SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670222

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, RONALD, , MR.,**

Mailing Address P.O. BOX 1444

City  
COEBURNState  
VAZip Code  
24230-1444FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LONE PINE EXTERMINATING CO., INC.Occupation (for Individual)  
PEST CONTROL OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668205

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2107 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, SUE, , ,**

Mailing Address 1044 CHURCH ST., NO.134

City  
SULPHUR SPRINGSState  
TXZip Code  
75482-2272FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669504**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, SUE, , ,**

Mailing Address 1044 CHURCH ST., NO.134

City  
SULPHUR SPRINGSState  
TXZip Code  
75482-2272FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670981**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAINES, KEVIN, H., MR.,**

Mailing Address 457 S MARENGO AVE. UNIT 21

City  
PASADENAState  
CAZip Code  
91101-3937FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JPL/CALTECHKEVIN BAINESOccupation (for Individual)  
RESEARCH SCIENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668629**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2108 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BALDWIN, JAMES, , MR.,**

Mailing Address 9 MAURA LANE

City  
DANBURYState  
CTZip Code  
06810-7118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668541**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BANKS, ALFRED, , ,**

Mailing Address 53 PECAN DRIVE

City  
ELLABELLState  
GAZip Code  
31308-7118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668879**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BASSHAM, CAROL, , ,**

Mailing Address 3351 S 175TH ST APT 200

City  
SEATACState  
WAZip Code  
98188-4408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

326.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668688**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2109 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BECKER, JOHN, L., MR.,**

Mailing Address 12823 CAVENDISH CT.

City  
FORT WAYNEState  
INZip Code  
46845-2339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ADVOCATE FINANCIAL LLCOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670091**

Amount of Each Receipt this Period

140.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEIGHT, MARY, , ,**

Mailing Address 2442 RADCLIFFE AVE

City  
INDIANAPOLISState  
INZip Code  
46227-8655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.85

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669215**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BELMONTE, JEAN, R., MRS.,**

Mailing Address 613 CUSTIS ROAD

City  
GLENSIDEState  
PAZip Code  
19038-2013FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668266**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

185.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2110 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BENNETT, ALBERT, , ,**

Mailing Address 200 MORRILL RD

City  
STARKVILLEState  
MSZip Code  
39759-5390FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670068**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERRY, MARILYN, , ,**

Mailing Address 40242 E LOUISIANA

City  
BENNETTState  
COZip Code  
80102-8436FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669823**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERRY, ROBERT, , ,**

Mailing Address P O BOX 213

City  
MARISSAState  
ILZip Code  
62257-0213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

314.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668344**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

236.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2111 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BINIENDA, MARY, E., MS.,**Mailing Address 28413 ABBEY LN  
APT 172City  
NEW HUDSONState  
MIZip Code  
48165-2804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670679**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669290**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669778**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2112 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOGGS, WILLIAM, , ,**

Mailing Address 188 CR 208

City  
ABBEVILLEState  
MSZip Code  
38601-9769FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SOUTHERN FARM BUREAUOccupation (for Individual)  
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669874**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOGOEFF, JAMES, , ,**

Mailing Address 1107 KEY PLAZA SUITE 162

City  
KEY WESTState  
FLZip Code  
33040-4077FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669867**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BORSTAD, DALE, , MR.,**

Mailing Address 14312 ARMSTRONG BLVD N W

City  
RAMSEYState  
MNZip Code  
55303-7281FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LAKE REGION RVSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671012**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

191.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2113 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOSMA, RACHEL, , ,**

Mailing Address 4078 SAGE SPRINGS

City  
KIMBERLYState  
IDZip Code  
83341-5370FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669679**

Amount of Each Receipt this Period

140.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOSS, CLINTON, , ,**

Mailing Address 10242 MATTOCK AVENUE

City  
DOWNEYState  
CAZip Code  
90241-3003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.26

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668886**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOSTIC, SIDNEY, , ,**

Mailing Address 8841 AUTUMN LAKE TRL

City  
MCKINNEYState  
TXZip Code  
75071-1798FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668462**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

434.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2114 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUGHER, ARTHUR KENNETH, , ,**

Mailing Address 103 CIRCLE DR

City  
MAYFIELDState  
KYZip Code  
42066-6902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
OLD HICKORY CLAY COOccupation (for Individual)  
TECHNICAL DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.53

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670037**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOULINEAU, EDWARD, C., MR.,**

Mailing Address 100 CIRCLE DR

City  
STATESBOROState  
GAZip Code  
30461-0578FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670803**

Amount of Each Receipt this Period

25.28

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOWMAN, JAMES, , , JR.**

Mailing Address 315, MAIN ST S STE 309

City  
MINOTState  
NDZip Code  
58701-3956FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668972**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2115 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYD, SARA, , ,**Mailing Address 120 AZALEA LOOP  
SUITE ACity  
HORSESHOE BAYState  
TXZip Code  
78657-6205FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670472**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYDA, KENNETH, , ,**

Mailing Address 1200 BARTON CREEK BLVD, #58

City  
AUSTINState  
TXZip Code  
78735-1633FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.73

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669705**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYDA, KENNETH, , ,**

Mailing Address 1200 BARTON CREEK BLVD, #58

City  
AUSTINState  
TXZip Code  
78735-1633FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

387.73

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669709**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2116 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYDA, KENNETH, , ,**

Mailing Address 1200 BARTON CREEK BLVD, #58

City  
AUSTINState  
TXZip Code  
78735-1633FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.73

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669719**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYNTON, LINDA, A., ,**

Mailing Address 15877 FOUR CORNER RD

City

PRAIRIE GROVE

State

AR

Zip Code

72753-9244

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.69

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669469**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRAXTON, ROBERT, LEON, MR., SR.**

Mailing Address 181 PATAULA HEIGHTS LN

City

FORT GAINES

State

GA

Zip Code

39851-2328

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.30

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670401**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.09



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2117 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRICKER, DONALD, , ,**

Mailing Address 1532 CR 222

City  
DURANGOState  
COZip Code  
81303-8101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

745.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669166**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRICKER, DONALD, , ,**

Mailing Address 1532 CR 222

City  
DURANGOState  
COZip Code  
81303-8101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

745.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669431**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROCK, KENNETH, , ,**

Mailing Address 408 N 9TH STREET

City  
NEW BADENState  
ILZip Code  
62265-1137FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

533.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669666**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2118 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRODERICK, FRANCIS, , ,**

Mailing Address 16 DUCK POND LN

City  
RAMSEYState  
NJZip Code  
07446-1643FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668274**

Amount of Each Receipt this Period

4.48

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROOKHART, PATRICIA, F., MS.,**Mailing Address 514 LIMERICK CIR  
UNIT 301City  
LUTHVLE TIMONState  
MDZip Code  
21093-8187FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

974.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669558**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROSTOWITZ, MICHAEL, , MR.,**Mailing Address 1322 S PRAIRIE AVE  
UNIT 1606City  
CHICAGOState  
ILZip Code  
60605-3083FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

349.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668049**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2119 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, BENNY, , ,**

Mailing Address 4338 NORTH CHAPEL ROAD

City  
FRANKLINState  
TNZip Code  
37067-7816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669729**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, JACK, , ,**

Mailing Address 5305 THORNBROOK PKWY

City  
COLUMBIAState  
MOZip Code  
65203-9789FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669969**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, WILLIAM, BRYANT, MR.,**

Mailing Address 408 FELLSWOOD PLACE

City  
LOUISVILLEState  
KYZip Code  
40243-1209FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

431.90

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670759**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2120 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRUMBAUGH, PHILIP, C., MR.,**

Mailing Address 108 PHILIP DR

City  
WEST MILTONState  
OHZip Code  
45383-1330FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668071**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRUMBAUGH, PHILIP, C., MR.,**

Mailing Address 108 PHILIP DR

City  
WEST MILTONState  
OHZip Code  
45383-1330FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670863**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITYState  
NJZip Code  
08226-2367FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

553.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668838**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2121 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITYState  
NJZip Code  
08226-2367FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.96

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670293**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUNN, KAY, , ,**

Mailing Address 1908 GAINESWOOD DR

City  
TUSCALOOSAState  
ALZip Code  
35406-3558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.15

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668474**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURNLEY, KARIN, , ,**

Mailing Address 5654 E 500 S

City  
WABASHState  
INZip Code  
46992-8168FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

905.64

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670336**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2122 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURNLEY, KARIN, , ,**

Mailing Address 5654 E 500 S

City  
WABASHState  
INZip Code  
46992-8168FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670340

Amount of Each Receipt this Period

150.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURNLEY, KARIN, , ,**

Mailing Address 5654 E 500 S

City  
WABASHState  
INZip Code  
46992-8168FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670344

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURNLEY, KARIN, , ,**

Mailing Address 5654 E 500 S

City  
WABASHState  
INZip Code  
46992-8168FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

905.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670345

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

289.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2123 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURNLEY, KARIN, , ,**

Mailing Address 5654 E 500 S

City  
WABASHState  
INZip Code  
46992-8168FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670346

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURNLEY, KARIN, , ,**

Mailing Address 5654 E 500 S

City  
WABASHState  
INZip Code  
46992-8168FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670349

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURNLEY, KARIN, , ,**

Mailing Address 5654 E 500 S

City  
WABASHState  
INZip Code  
46992-8168FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

905.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670353

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

239.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2124 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURNLEY, KARIN, , ,**

Mailing Address 5654 E 500 S

City  
WABASHState  
INZip Code  
46992-8168FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670356

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURNLEY, KARIN, , ,**

Mailing Address 5654 E 500 S

City  
WABASHState  
INZip Code  
46992-8168FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670361

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURNLEY, KARIN, , ,**

Mailing Address 5654 E 500 S

City  
WABASHState  
INZip Code  
46992-8168FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

905.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670368

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

168.80



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2125 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURNLEY, KARIN, , ,**

Mailing Address 5654 E 500 S

City  
WABASHState  
INZip Code  
46992-8168FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670379**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUSBY, CHARLOTTE, , ,**

Mailing Address 5110 BEECH ST

City  
BELLAIREState  
TXZip Code  
77401-3327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1628.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668063**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUSBY, CHARLOTTE, , ,**

Mailing Address 5110 BEECH ST

City  
BELLAIREState  
TXZip Code  
77401-3327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1628.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668064**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

601.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2126 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BYERS, JOHN, , ,**

Mailing Address 2590 NORTH KINGS HIGHWAY

City  
FORT PIERCEState  
FLZip Code  
34951-4019FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MANUFACTURING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670235**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CADICAMO, EVELYN, M., MRS.,**

Mailing Address 43577 SERENITY DR

City  
NORTHVILLEState  
MIZip Code  
48167-8932FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669674**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CADICAMO, EVELYN, M., MRS.,**

Mailing Address 43577 SERENITY DR

City  
NORTHVILLEState  
MIZip Code  
48167-8932FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670640**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

157.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2127 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CALZADA, MARGARITA, Y., ,**

Mailing Address 11375 SAGE AVENUE

City  
FONTANAState  
CAZip Code  
92337-0119FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CHAPARRAL MEDICAL GROUPOccupation (for Individual)  
PATIENT SERVICES REPRESENTATI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671070**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 8010 VILLAGE DR.

City  
BEAUMONTState  
TXZip Code  
77713-8485FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INVISTAOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670584**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671057**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.79

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2128 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671063**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671073**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669103**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2129 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669106

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669110

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669111

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 2130 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27669113**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27669118**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27669120**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2131 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669122

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669124

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669127

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

81.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2132 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

**Transaction ID : SA11A.27669138**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

**Transaction ID : SA11A.27668114**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

**Transaction ID : SA11A.27669265**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.91



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2133 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CASPERSON, CAROLINA, , MS.,**

Mailing Address 100 SAINT PAUL ST, STE 700

City  
DENVERState  
COZip Code  
80206-5143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MUSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668304**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CASSENTI, JEAN, , ,**

Mailing Address 29 ARNOLD DR

City  
TOLLANDState  
CTZip Code  
06084-2810FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668771**

Amount of Each Receipt this Period

20.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670822**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2134 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHARLTON, VINCENT, R., ,**

Mailing Address 104 CREEK POINT CT

City  
COLONIAL HEIGHTSState  
VAZip Code  
23834-2215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.93

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670417**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHARLTON, VINCENT, R., ,**

Mailing Address 104 CREEK POINT CT

City  
COLONIAL HEIGHTSState  
VAZip Code  
23834-2215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.93

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670423**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHARLTON, VINCENT, R., ,**

Mailing Address 104 CREEK POINT CT

City  
COLONIAL HEIGHTSState  
VAZip Code  
23834-2215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.93

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670426**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2135 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHARLTON, VINCENT, R., ,**

Mailing Address 104 CREEK POINT CT

City  
COLONIAL HEIGHTSState  
VAZip Code  
23834-2215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670430**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHARLTON, VINCENT, R., ,**

Mailing Address 104 CREEK POINT CT

City  
COLONIAL HEIGHTSState  
VAZip Code  
23834-2215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670436**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAVEZ, GEORGE, , ,**

Mailing Address POST OFFICE BOX 393

City  
YERMOState  
CAZip Code  
92398-0393FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KBROccupation (for Individual)  
VEHICLE SUPPORT TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670198**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

28.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2136 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHAVERA, OFILIA, , ,**

Mailing Address 3100 TWISTED CREEK

City  
SAN ANTONIOState  
TXZip Code  
78230-4046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1048.13

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668543**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHRISTIAN, SUSAN, A., MRS.,**

Mailing Address 2828 ASH MILL RD

City  
DOYLESTOWNState  
PAZip Code  
18902-1931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.50

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668058**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CITRON, DIANE, M., MRS.,**

Mailing Address 2620 ARIZONA AVE, APT 3

City  
SANTA MONICAState  
CAZip Code  
90404-1415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

613.31

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670193**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

42.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2137 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CITRON, DIANE, M., MRS.,**

Mailing Address 2620 ARIZONA AVE, APT 3

City  
SANTA MONICAState  
CAZip Code  
90404-1415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.31

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670240**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLAVEL, ROBERT, L., MR.,**

Mailing Address 827 CARILLON DR.

City  
BARTLETTState  
ILZip Code  
60103-4596FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.41

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670047**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLEMENTS, ASHLEY, , ,**

Mailing Address 3950 WHEELER ROAD

City  
BAY CITYState  
MIZip Code  
48706-1857FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CLEMENTS CONTRACTINGOccupation (for Individual)  
OFFICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

585.90

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668528**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2138 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLOUD, EVELYN, , ,**

Mailing Address 8211 MAR DEL PLARA STREET EAST

City  
JACKSONVILLEState  
FLZip Code  
32256-7349FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670801**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLE, JOSEPH, C., DR.,**

Mailing Address 604 OLSON ST.

City  
RIDGWAYState  
PAZip Code  
15853-9758FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COLE ORTHODONTIC ASSOC.Occupation (for Individual)  
ORTHODONTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669965**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668218**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

157.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2139 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668225**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668507**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668562**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2140 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669242**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669261**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669430**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2.98



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2141 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLUCCI, MARYLOU, , ,**

Mailing Address 127 BAYVIEW LN

City  
STATEN ISLANDState  
NYZip Code  
10309-3638FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.45

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668511**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670192**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONSTANZI, CHARLES, B., ,**

Mailing Address P.O. BOX 670

City  
PRINCETONState  
LAZip Code  
71067-0670FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

743.52

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668674**

Amount of Each Receipt this Period

14.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

34.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2142 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COOMBES, JIM, , MR.,**Mailing Address 7031 BEACH DR. SW  
APT DCity  
SEATTLEState  
WAZip Code  
98136-2095FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONSTRUCTION PLANNING AND M.Occupation (for Individual)  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668946**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CORNTHWAITE, SHARON, , ,**

Mailing Address BOX 23

City  
STORYState  
WYZip Code  
82842-0023FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670095**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORUM, SARAH, , ,**

Mailing Address 3258 DUNCAN AV

City  
CLOVISState  
CAZip Code  
93619-5006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

498.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669000**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2143 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COX, THOMAS, , ,**

Mailing Address 120 SOUTH DEE ROAD

City  
PARK RIDGEState  
ILZip Code  
60068-3720FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ACME MACHILL COOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669881

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COX, THOMAS, , ,**

Mailing Address 120 SOUTH DEE ROAD

City  
PARK RIDGEState  
ILZip Code  
60068-3720FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ACME MACHILL COOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670300

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668271

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

159.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2144 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668914**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURRIE, RODNEY, , ,**

Mailing Address 19 LAKE ROAD

City  
BRENTWOODState  
NHZip Code  
03833-6243FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ALLTECH RESOURCES, LLC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670825**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURRIE, RODNEY, , ,**

Mailing Address 19 LAKE ROAD

City  
BRENTWOODState  
NHZip Code  
03833-6243FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ALLTECH RESOURCES, LLC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670835**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66.40

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2145 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURRIE, RODNEY, , ,**

Mailing Address 19 LAKE ROAD

City  
BRENTWOOD

State  
NH

Zip Code  
03833-6243

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

ALLTECH RESOURCES, LLC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

**02** / **10** / **2025**

**Transaction ID : SA11A.27670838**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURRIE, RODNEY, , ,**

Mailing Address 19 LAKE ROAD

City  
BRENTWOOD

State  
NH

Zip Code  
03833-6243

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

ALLTECH RESOURCES, LLC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

**02** / **10** / **2025**

**Transaction ID : SA11A.27670842**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURRY, ROBERT, J., ,**

Mailing Address 1205 ANDTE CIR.

City  
CLAREMORE

State  
OK

Zip Code  
74017-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.13

Date of Receipt

**02** / **10** / **2025**

**Transaction ID : SA11A.27668995**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

63.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2146 OF 6441  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURRY, ROBERT, J., ,**

Mailing Address 1205 ANDTE CIR.

City  
CLAREMOREState  
OKZip Code  
74017-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.13

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670290**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DALRYMPLE, TERRANCE, D., MR.,**

Mailing Address 1851 OXFORD TRENTON RD

City  
OXFORDState  
OHZip Code  
45056-9158FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.30

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668880**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAVIDSON, JO, , ,**

Mailing Address POBOX336

City  
WASHINGTONState  
OKZip Code  
73093-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.98

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670979**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2147 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAVIS, THERESA, , ,**

Mailing Address 120 ROUTE 17

City  
SLOATSBURGState  
NYZip Code  
10974-2642FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DSSOccupation (for Individual)  
RETAILER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668978**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DERDA, JOHN, , ,**

Mailing Address 1195 W BERTRAND RD

City  
NILESState  
MIZip Code  
49120-8772FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CABINETMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670274**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEVERS, RONALD, , ,**

Mailing Address 2965 CHERRY BLOSSOM LOOP

City  
SAINT CLOUDState  
FLZip Code  
34771-9339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669992**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2148 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEVRIES, EDWARD, , ,**

Mailing Address 122 PINERIDGE LOOP

City  
CROSSVILLEState  
TNZip Code  
38558-6536FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669505

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIDOMINICIS, JUDITH, A., ,**

Mailing Address 224E SPRINGMEADOW DR.

City  
HOLBROOKState  
NYZip Code  
11741-4129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668517

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIDOMINICIS, JUDITH, A., ,**

Mailing Address 224E SPRINGMEADOW DR.

City  
HOLBROOKState  
NYZip Code  
11741-4129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669503

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.25



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2149 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIEDERICH, NORMAN, F., DR.,**

Mailing Address 9004 TIMBER EDGE DR.

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-6321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670959**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIXON, JOHN, , ,**

Mailing Address 11030 MADISON CT

City  
BEAUMONTState  
TXZip Code  
77705-9600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WELLSFARGOADVISORSOccupation (for Individual)  
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

812.40

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670683**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOBBINS, LINDA, , ,**

Mailing Address 1000 S. MCKERN CT UNIT 120

City  
NEWBERGState  
ORZip Code  
97132-7185FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669655**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2150 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOLLE, BILL, , ,**

Mailing Address 92310 N FM 1264

City  
LUBBOCKState  
TXZip Code  
79415-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670200

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOWNER, KATHERINE, K., MRS.,**

Mailing Address 3726 COUNTRY CLUB DRIVE

City  
TRAVERSE CITYState  
MIZip Code  
49684-4679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669721

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUGAS, MATTHEW, P., MR.,**

Mailing Address 11 WILDFLOWER PLACE

City  
NORTH OAKSState  
MNZip Code  
55127-6223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARCOccupation (for Individual)  
ARC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670605

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

228.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2151 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNHAM, VICTORIA, , ,**

Mailing Address PO BOX 517

City  
RIDGEFIELDState  
WAZip Code  
98642-0517FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669896**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNLEVY, PATRICIA, , ,**

Mailing Address 5121 BROWNSTONE DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-6028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.90

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669212**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUTCHER, MICHAEL, A., MR.,**

Mailing Address 6628 TANGLEWOOD RD

City  
SAN DIEGOState  
CAZip Code  
92111-4146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

383.31

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670626**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

128.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2152 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EASOW, BABU, , ,**

Mailing Address 29 INDIAN RUN

City  
EAST QUOGUEState  
NYZip Code  
11942-4947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670017

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670431

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670449

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2153 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINN

State  
TX

Zip Code  
78563-0056

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

**02** / **10** / **2025**

**Transaction ID : SA11A.27671016**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELKINS, EVA, P., MRS.,**

Mailing Address 10375 WILSHIRE BLVD  
9G

City

LOS ANGELES

State

CA

Zip Code

90024-4750

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.25

Date of Receipt

**02** / **10** / **2025**

**Transaction ID : SA11A.27668238**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELLINGSON, MICHAEL, , ,**

Mailing Address P.O. BOX 2473

City

BURLESON

State

TX

Zip Code

76097-2473

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

**02** / **10** / **2025**

**Transaction ID : SA11A.27669283**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2154 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENGLE, DOUGLAS, , ,**

Mailing Address 7209 CADILLAC DR. SE

City  
HUNTSVILLEState  
ALZip Code  
35802-2401FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DEPT OF THE ARMYOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670250**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EVANS, LINDA, , ,**

Mailing Address 130 CRESCENT AVE. #306

City  
SUNNYVALEState  
CAZip Code  
94087-2765FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668844**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FANKHOUSER, JERRY, W., MR.,**

Mailing Address 920 KINZUA RD

City  
WARRENState  
PAZip Code  
16365-9627FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668072**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2155 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FARRILL, CRAIG, , MR.,**

Mailing Address 162 POLK ROAD 89

City  
MENAState  
ARZip Code  
71953-8940FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VIZIV TECHNOLOGIESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.61

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669049**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FIOLA, SHARON, , ,**

Mailing Address 2041 UTAH RD

City  
RANTOULState  
KSZip Code  
66079-9024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.91

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669670**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FIOLA, SHARON, , ,**

Mailing Address 2041 UTAH RD

City  
RANTOULState  
KSZip Code  
66079-9024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.91

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670364**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2156 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISCHER, EDDIE, R., MR.,**

Mailing Address 2020 E ORANGETHORPE AVE

City  
FULLERTONState  
CAZip Code  
92831-5327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VISITA PAINT INC.Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670194**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLANAGAN, MICHAEL, , ,**

Mailing Address 2150 EAST WELLINGTON AVENUE

City  
SANTA ANAState  
CAZip Code  
92701-3184FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670755**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLEMING, DEBORAH, , MS.,**

Mailing Address 1629 E. JEFFERSON BLVD.

City  
MISHAWAKAState  
INZip Code  
46545-7103FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670746**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.30



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2157 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORSTER, KATHY, , MS.,**

Mailing Address 712 LA MARITE DR

City  
MANCHESTERState  
MOZip Code  
63021-7014FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SSMOccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668455**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FOX, MICHAEL, , ,**Mailing Address 552 S RACCOON RD  
APT H18City  
YOUNGSTOWNState  
OHZip Code  
44515-3632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668276**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FOX, MICHAEL, , ,**Mailing Address 552 S RACCOON RD  
APT H18City  
YOUNGSTOWNState  
OHZip Code  
44515-3632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670775**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.03

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2158 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FULFER, KIM, , ,**

Mailing Address P.O. BOX 548

City  
JAL

State  
NM

Zip Code  
88252-0548

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

**Transaction ID : SA11A.27668540**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FULLER, JOHN, D., MR.,**

Mailing Address 279 TOURNAMENT LN.

City  
FREEPORT

State  
FL

Zip Code  
32439-6241

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

**Transaction ID : SA11A.27668407**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FYUSCHETTO, ROCCO, , ,**

Mailing Address 1988 ROUTE 22

City  
SCOTCH PLAINS

State  
NJ

Zip Code  
07076-1014

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARGUS INVESTIGATIVE

Occupation (for Individual)  
PRIVATE DETECTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

**Transaction ID : SA11A.27670635**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

111.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2159 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668321**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668645**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GARNETT, THOMAS, , ,**

Mailing Address 4789 BETHLEHEM ROAD

City  
CHARLOTTE C HState  
VAZip Code  
23923-4197FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669022**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

126.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2160 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GASBARRA, FRANCES, , ,**

Mailing Address PO BOX 84

City  
GOLFState  
ILZip Code  
60029-0084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FORTE INTERNATIONAL TAXOccupation (for Individual)  
DIRECTOR/ OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669627**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GASBARRA, FRANCES, , ,**

Mailing Address PO BOX 84

City  
GOLFState  
ILZip Code  
60029-0084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FORTE INTERNATIONAL TAXOccupation (for Individual)  
DIRECTOR/ OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669628**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GASBARRA, FRANCES, , ,**

Mailing Address PO BOX 84

City  
GOLFState  
ILZip Code  
60029-0084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FORTE INTERNATIONAL TAXOccupation (for Individual)  
DIRECTOR/ OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

324.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669629**

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2161 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GASBARRA, FRANCES, , ,**

Mailing Address PO BOX 84

City  
GOLFState  
ILZip Code  
60029-0084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FORTE INTERNATIONAL TAXOccupation (for Individual)  
DIRECTOR/ OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669635**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GASBARRA, FRANCES, , ,**

Mailing Address PO BOX 84

City  
GOLFState  
ILZip Code  
60029-0084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FORTE INTERNATIONAL TAXOccupation (for Individual)  
DIRECTOR/ OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669639**

Amount of Each Receipt this Period

11.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GAYLORD, ED, , ,**

Mailing Address 5709 N SAGUARO RD

City  
PARADISE VALLEYState  
AZZip Code  
85253-5238FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669415**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

546.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2162 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670826

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670828

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670831

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2163 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GEHRING, CARL, , ,

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670832

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GEHRING, CARL, , ,

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670833

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GEHRING, CARL, , ,

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670839

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2164 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670845

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GEORGUSIS, JOSEPH, , ,**

Mailing Address 2 FORREST COURT

City  
METAIRIEState  
LAZip Code  
70001-6155FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669849

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEVER, MARIA, , ,**

Mailing Address 2000 S OCEAN BLVD

City  
BOCA RATONState  
FLZip Code  
33432-8535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670770

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

205.18



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2165 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIBSON, JOYCE, , ,**

Mailing Address 1701 HOPEMAN PARKWAY

City  
WAYNESBOROState  
VAZip Code  
22980-1970FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.40

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670179**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIUGLIANO, ROBERT, , ,**

Mailing Address 2202 BUCKHOLT STREET

City  
PEARLANDState  
TXZip Code  
77581-6218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.65

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27671094**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLADUE, CRAIG, , ,**

Mailing Address 1061 S SPRUCE AVE

City  
BLOOMINGTONState  
CAZip Code  
92316-1531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

302.99

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669672**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2166 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669690**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLENN, SAMUEL, , , JR.**Mailing Address 5490 ARBOR BRANCH DR.  
APT 234City  
SHALLOTTEState  
NCZip Code  
28470-6111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.81

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670510**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLOVER, AVERIL, , ,**

Mailing Address 446 LANCASHIRE RUN

City  
SMITHFIELDState  
NCZip Code  
27577-8029FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.53

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668255**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2167 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLUECKERT, MARK, J., MR.,**

Mailing Address 3088 HOURGLASS PL.

City  
BROOMFIELDState  
COZip Code  
80023-8025FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MOLSON COORS BEVERAGEOccupation (for Individual)  
IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668054**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOMBERG, GALINA, , ,**

Mailing Address 96 CARRICK CIR.

City  
HAYWARDState  
CAZip Code  
94542-7912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1414.06

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669614**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669777**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2168 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOTELLI, ANDREW, , ,**

Mailing Address 2925 EVENING ROCK STREET

City  
LAS VEGASState  
NVZip Code  
89135-1633FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668905**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAYBASH, PETER, J., MR., JR.**

Mailing Address 4 CAMBRIDGE DR.

City  
HERSHEYState  
PAZip Code  
17033-2100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670772**

Amount of Each Receipt this Period

12.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, LINDA, , ,**

Mailing Address 15657 FM 244

City  
IOLAState  
TXZip Code  
77861-3867FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669063**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2169 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598-2323FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668724

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREINER, MICHAEL, J., ,**

Mailing Address PO BOX 621

City  
MARSTONS MILLSState  
MAZip Code  
02648-0621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670781

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREMBI, JAMES, , MR.,**

Mailing Address 82 PUTTER DRIVE

City  
PALM COASTState  
FLZip Code  
32164-4700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669543

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

111.45

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2170 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRIMES, RAYMOND, M., MR.,

Mailing Address 257 BRIGHT ST.

City  
CAVE SPRINGSState  
ARZip Code  
72718-9690FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669696

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GROSE, ROY, , ,

Mailing Address 1401 FOURAKER RD

City  
JACKSONVILLEState  
FLZip Code  
32221-6682FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670767

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GROVER, JANICE, , ,

Mailing Address 173 HIGH STREET

City  
PACHECOState  
CAZip Code  
94553-5505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669889

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2171 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROVER, JANICE, , ,**

Mailing Address 173 HIGH STREET

City  
PACHECOState  
CAZip Code  
94553-5505FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669897**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROVER, JANICE, , ,**

Mailing Address 173 HIGH STREET

City  
PACHECOState  
CAZip Code  
94553-5505FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669916**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROVER, KAREN, , ,**

Mailing Address 925 COLORADO ST

City  
MARSEILLESState  
ILZip Code  
61341-1241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670999**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2172 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUDORF, KENNETH, , ,**

Mailing Address 970 CAPE MARCO DR.

City  
MARCO ISLANDState  
FLZip Code  
34145-6399FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1716.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668496**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUDORF, KENNETH, , ,**

Mailing Address 970 CAPE MARCO DR.

City  
MARCO ISLANDState  
FLZip Code  
34145-6399FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1716.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670837**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUNN PHILLIPS, BEATRICE, ELVA, MS.,**

Mailing Address 16399 WATSON RD

City  
GUERNEVILLEState  
CAZip Code  
95446-8937FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

424.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669319**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.97



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2173 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HACKL, MARK, , ,**

Mailing Address 485 HICKORY NUT AVE

City  
OLDSMARState  
FLZip Code  
34677-2016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670877

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HACKL, MARK, , ,**

Mailing Address 485 HICKORY NUT AVE

City  
OLDSMARState  
FLZip Code  
34677-2016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670905

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HADDEN, MAYO, , MR.,**Mailing Address 4701 TURNBERRY LN  
UNIT 9BCity  
COLUMBUSState  
GAZip Code  
31909-8070FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668003

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2174 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAISLER, SHIRLEY, A., MS.,**

Mailing Address 1200 COWLING RD

City  
SANGERState  
TXZip Code  
76266-9084FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668021**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMILTON, BILL, , ,**

Mailing Address 7713 KOLMAR AVE

City  
SKOKIEState  
ILZip Code  
60076-3654FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668341**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HANNA, SYLVIA, , ,**

Mailing Address 6109 N GALENA RD

City  
PEORIAState  
ILZip Code  
61614-3605FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670734**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2175 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANSEN, TERESA, , ,**

Mailing Address 2917 , KANDAHAR DR

City  
SAINT CHARLESState  
MOZip Code  
63303-3166FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670751**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSEN, TERESA, , ,**

Mailing Address 2917 , KANDAHAR DR

City  
SAINT CHARLESState  
MOZip Code  
63303-3166FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670782**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HANSON, BOB, , ,**

Mailing Address 1326 HICKORYCREEK CT.

City  
WICHITAState  
KSZip Code  
67235-7000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WEIGAND OMEGA MGTOccupation (for Individual)  
PROPERTY MGT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

841.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670971**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2176 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARANG, GORDON, , MR.,**

Mailing Address 1517 SAWMILL CREEK ROAD

City  
SITKAState  
AKZip Code  
99835-9704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARROWHEAD TRANS. INC.Occupation (for Individual)  
CORP. OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668505

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARANG, GORDON, , MR.,**

Mailing Address 1517 SAWMILL CREEK ROAD

City  
SITKAState  
AKZip Code  
99835-9704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARROWHEAD TRANS. INC.Occupation (for Individual)  
CORP. OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670922

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARDER, BRUCE, RICHARD, ,**

Mailing Address 1047 PORTUGAL DR

City  
STAFFORDState  
VAZip Code  
22554-2025FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668022

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

158.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2177 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRAH, TONY, , ,**

Mailing Address 355 BOXINGTON WAY

City  
SPARKSState  
NVZip Code  
89434-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2456.46

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669125**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRIS, DIANE, , ,**

Mailing Address 5021 WEST 4075 SOUTH

City  
WEST HAVENState  
UTZip Code  
84401-9386FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670304**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRYMAN, CHARLOTTE, , ,**

Mailing Address 16415 WAGON WHEEL DRIVE

City  
RIVERSIDEState  
CAZip Code  
92506-5849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

421.50

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670389**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2178 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAYES, JOHN, , ,**

Mailing Address 3548 PEBBLE BEACH DR.

City  
AUGUSTAState  
GAZip Code  
30907-9520FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670226

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAYNES, MARION, F., MS.,**

Mailing Address 3141 SOUTH PACIFIC AVENUE

City  
SAN PEDROState  
CAZip Code  
90731-6715FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668051

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAYS, CHARLES, RAYMOND, MR.,**

Mailing Address 3100 BROOKHILL DR.

City  
BIRMINGHAMState  
ALZip Code  
35242-3702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670691

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2179 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HELFEN, WILLIAM, , ,**

Mailing Address 5437 HARGROVE BOULEVARD

City  
VIRGINIA BEACHState  
VAZip Code  
23464-2333FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.03

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669869**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENDERSON, JOSEPH, , ,**

Mailing Address 2312 EAST SPRUCE STREET

City  
SEATTLEState  
WAZip Code  
98122-6053FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RECOLOGYOccupation (for Individual)  
GARBAGE MAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.37

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670530**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENLEY, DOY, B., MR.,**

Mailing Address 14251 MIMOSA LANE

City  
TUSTINState  
CAZip Code  
92780-2334FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6843.04

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668245**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

323.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2180 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HESTER, DON, , ,**

Mailing Address 3981 F. ST.

City  
EUREKAState  
CAZip Code  
95503-6003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670525**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669922**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668179**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.82



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2181 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIPP, CHARLES, R., ,**

Mailing Address 4226 ROBERTS RD

City  
KERSHAWState  
SCZip Code  
29067-8761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27670756**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HODGES, WILLIAM, , ,**

Mailing Address 9681 PLUM CREEK RD

City  
SEALYState  
TXZip Code  
77474-7839FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27669472**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLMES, ELIZABETH, , ,**

Mailing Address 651 MARSTEN GREEN COURT

City  
AMBLERState  
PAZip Code  
19002-1819FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27669353**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2182 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOOPER, WILLIAM, , MR.,**

Mailing Address 249 RUSTIC CANYON DR.

City  
GRANTS PASSState  
ORZip Code  
97526-8848FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668249

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOPKINS, GEORGE, , ,**

Mailing Address 135 CR 2984

City  
HUGHES SPRINGSState  
TXZip Code  
75656-6715FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668197

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOPKINS, GEORGE, , ,**

Mailing Address 135 CR 2984

City  
HUGHES SPRINGSState  
TXZip Code  
75656-6715FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668657

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2183 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOWELL, STEVEN, J., MR.,**

Mailing Address 7302 REFLECTION RD CT.

City  
WICHITAState  
KSZip Code  
67205-1623FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KANSAS ORTHOPEDIC CENTEROccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668428

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668301

Amount of Each Receipt this Period

3.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUDSON, ROBERT, Y., MR., JR.**

Mailing Address P.O. BOX 370

City  
SEBASTOPOLState  
MSZip Code  
39359-0370FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

228.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669772

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2184 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUGHES, THEO, , ,**

Mailing Address 5502 GLENLIVET PL

City  
GREENVILLEState  
TXZip Code  
75402-4204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671128**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HULL, GUY, , ,**

Mailing Address 2521 S. GLENBROOK DR.

City  
GARLANDState  
TXZip Code  
75041-2903FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GUY HULL II J DOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668723**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IRELAN, ROBERT, , ,**

Mailing Address 25 BEAR FLOWER TRAIL

City  
ARDENState  
NCZip Code  
28704-5002FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

430.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670469**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2185 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IVERSON, MARC, M., MR.,**

Mailing Address 5200 BEVINGTON PLACE

City  
CHARLOTTE

State  
NC

Zip Code  
28277-5504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1301.44

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025

**Transaction ID : SA11A.27668017**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IVERSON, MARC, M., MR.,**

Mailing Address 5200 BEVINGTON PLACE

City  
CHARLOTTE

State  
NC

Zip Code  
28277-5504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1301.44

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025

**Transaction ID : SA11A.27669907**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACKSON, MARLA, , ,**

Mailing Address 14959 CURRY ST

City  
MORENO VALLEY

State  
CA

Zip Code  
92553-5019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.89

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025

**Transaction ID : SA11A.27668275**

Amount of Each Receipt this Period

0.19

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

360.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2186 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACKSON, MARLA, , ,**

Mailing Address 14959 CURRY ST

City  
MORENO VALLEYState  
CAZip Code  
92553-5019FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669762**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACOBSON, HAL, , ,**

Mailing Address 1213 E. LAKE COLONY DRIVE

City  
MAITLANDState  
FLZip Code  
32751-6125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670078**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670860**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2187 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, BRADLEY, R., ,**

Mailing Address 368 HUDSON STREET

City  
PAYNESVILLEState  
MNZip Code  
56362-1235FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KORONIS PARTS, INCOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27669846**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, BRADLEY, R., ,**

Mailing Address 368 HUDSON STREET

City  
PAYNESVILLEState  
MNZip Code  
56362-1235FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KORONIS PARTS, INCOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27669856**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, BRADLEY, R., ,**

Mailing Address 368 HUDSON STREET

City  
PAYNESVILLEState  
MNZip Code  
56362-1235FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KORONIS PARTS, INCOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27669866**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

205.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2188 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGSState  
IDZip Code  
83276-1671FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.88

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668230**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWSState  
TXZip Code  
79714-2010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.20

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669440**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOYCE, RICHARD, , ,**Mailing Address 1350 E NORTH ST  
LOT 84City  
CROWN POINTState  
INZip Code  
46307-6400FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

284.31

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670996**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17.29



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2189 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAEMERLE, HAROLD, , MR.,**Mailing Address 2165 SAN DIEGO AVE  
205City  
SAN DIEGOState  
CAZip Code  
92110-2908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HAROLD KAEMERLEOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670288**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAEMERLE, HAROLD, , MR.,**Mailing Address 2165 SAN DIEGO AVE  
205City  
SAN DIEGOState  
CAZip Code  
92110-2908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HAROLD KAEMERLEOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670747**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAPETANAKIS, GEORGE, J., ,**

Mailing Address 9801TANDEM CT

City  
RALEIGHState  
NCZip Code  
27615-1553FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668694**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

205.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2190 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAPETANAKIS, GEORGE, J., ,**

Mailing Address 9801TANDEM CT

City  
RALEIGHState  
NCZip Code  
27615-1553FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.09

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668862**

Amount of Each Receipt this Period

49.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEARNEY, JOYCE, G., MRS.,**

Mailing Address 7 BATTLE RD

City  
HAMPTONState  
VAZip Code  
23666-1403FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.10

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668160**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEARNEY, JOYCE, G., MRS.,**

Mailing Address 7 BATTLE RD

City  
HAMPTONState  
VAZip Code  
23666-1403FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.10

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670473**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2191 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KELLY, DONNA, , ,**

Mailing Address 541 COLUMBIA DRIVE

City  
ROCKWALLState  
TXZip Code  
75032-5710FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668494

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KELLY, DONNA, , ,**

Mailing Address 541 COLUMBIA DRIVE

City  
ROCKWALLState  
TXZip Code  
75032-5710FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668895

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEMP, REGINA, , ,**

Mailing Address 135 FOXHOLLIES BLVD

City  
BESSEMERState  
ALZip Code  
35022-5026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

512.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669445

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

179.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2192 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KESSELRING, GLEN, , ,**

Mailing Address 11579 AGENCY HEDRICK RD

City  
OTTUMWAState  
IAZip Code  
52501-9036FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668845**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIELY, SUSAN, , ,**

Mailing Address 5500 E PEAKVIEW

City  
LITTLETONState  
COZip Code  
80121-3539FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670391**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KINCADE, ROBERT, A., MR.,**

Mailing Address 2550 UNIVERSITY AVE W

City  
SAINT PAULState  
MNZip Code  
55114-1052FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STONEBRIDGE CAPITAL ADVISORSOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

596.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668873**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2193 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KINCADE, ROBERT, A., MR.,**

Mailing Address 2550 UNIVERSITY AVE W

City  
SAINT PAULState  
MNZip Code  
55114-1052FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STONEBRIDGE CAPITAL ADVISORSOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669904**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KING, BRENT, , ,**

Mailing Address 6243 PEACOCK RUN

City  
LAKELANDState  
FLZip Code  
33809-5654FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668437**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, TANYA, LUNN, MRS.,**

Mailing Address 1048 ELLERBE CT.

City  
SHREVEPORTState  
LAZip Code  
71106-7757FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669514**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

205.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2194 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KIRKWOOD, DAVID, , ,**

Mailing Address 601 LEEWARD LOOP

City  
COVINGTONState  
LAZip Code  
70433-7934FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DAVID KIRKWOODOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668950

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KITE, BRIAN, , ,**

Mailing Address 20100 WELLS DRIVE

City  
LOS ANGELESState  
CAZip Code  
91364-4728FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SRK ARCHITECTS INC.Occupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671078

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNOX, DONNA, , ,**

Mailing Address 5055 W C30A # 1016

City  
SANTA ROSA BEACHState  
FLZip Code  
32459-4373FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

452.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668563

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

218.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2195 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNOX, DONNA, , ,**

Mailing Address 5055 W C30A # 1016

City  
SANTA ROSA BEACHState  
FLZip Code  
32459-4373FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668566**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOONTZ, LINDA, , ,**

Mailing Address 155 PARKLAND DR

City  
SALISBURYState  
NCZip Code  
28146-8205FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670854**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KURZET, ANNE, L., MS.,**

Mailing Address 33762 VALLE ROAD

City  
SAN JUAN CAPISTRANState  
CAZip Code  
92675-4816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

709.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668032**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

157.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2196 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KURZET, ANNE, L., MS.,**

Mailing Address 33762 VALLE ROAD

City  
SAN JUAN CAPISTRANState  
CAZip Code  
92675-4816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.30

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668744**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KURZET, ANNE, L., MS.,**

Mailing Address 33762 VALLE ROAD

City  
SAN JUAN CAPISTRANState  
CAZip Code  
92675-4816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.30

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668912**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAIRD, GORDON, , ,**

Mailing Address 39451 E 41RD

City  
MORRISONState  
OKZip Code  
73061-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PAWNEE HEALTH AND WELLNESSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

293.72

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669831**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2197 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LALONDE, RICHARD , , ,**

Mailing Address 3332 NW 47TH CT

City  
OCALAState  
FLZip Code  
34482-8322FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

938.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669042**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LALONDE, RICHARD , , ,**

Mailing Address 3332 NW 47TH CT

City  
OCALAState  
FLZip Code  
34482-8322FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

938.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669098**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANEY, RONALD , , ,**

Mailing Address 531 MAPLE DR.

City  
SUMMERVILLEState  
GAZip Code  
30747-1799FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670325**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2198 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANEY, RONALD, , ,**

Mailing Address 531 MAPLE DR.

City  
SUMMERVILLEState  
GAZip Code  
30747-1799FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670331**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANG, HELEN, L., MS.,**

Mailing Address 28 HILLSIDE RD

City  
BEACONState  
NYZip Code  
12508-4129FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669621**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668509**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2199 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANTZ, IRENE, L., ,**

Mailing Address 8175 W FARM ROAD 168

City  
REPUBLICState  
MOZip Code  
65738-9327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.71

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668781**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LARIMER, ROBERT, S., ,**

Mailing Address 6110 BAYOU CROSSING DRIVE

City  
ALEXANDRIAState  
LAZip Code  
71303-7002FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SOUND PHYSICIANOccupation (for Individual)  
HOSPITALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.66

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669164**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LARKINS, BLAIR, , ,**

Mailing Address 220 S FAYETTE ST

City  
ALEXANDRIAState  
VAZip Code  
22314-3520FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCKORNY GROUPOccupation (for Individual)  
GOV'T AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670675**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

393.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2200 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAYO, LEWIS, DANIEL, MR., SR.**

Mailing Address 2316 W VINE ST

City  
LODIState  
CAZip Code  
95242-3727FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

H&amp;R BLOCK TAX GROUP

Occupation (for Individual)

ENROLLED AGENT/TAX PREPARATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668516**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEIGH-DARLAND, RYANNE, , ,**Mailing Address 6890 E. SUNRISE DR.  
STE.120-155City  
TUCSONState  
AZZip Code  
85750-0738FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CAPSTONE COACHING SERVICES

Occupation (for Individual)

PROFESSIONAL LIFE COACH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670217**

Amount of Each Receipt this Period

9.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LESHAN, KIMBERLY, , ,**

Mailing Address 28745 VILLAGE LN

City

FARMINGTON HILLS

State  
MIZip Code  
48334-3153FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671091**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.05

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2201 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LESSY JR, ROY, , ,**

Mailing Address 64 BLACKPOOL RD

City  
REHOBOTH BEACH

State  
DE

Zip Code  
19971-3511

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.36

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025

**Transaction ID : SA11A.27669852**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEVEY, KIMBERLY, , ,**

Mailing Address 4608 RESERVOIR RD

City  
GENESEO

State  
NY

Zip Code  
14454-9760

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
LANDLORD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025

**Transaction ID : SA11A.27670587**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEWIS, JENNY, BAUM, MS.,**

Mailing Address 3197 HARVEST MOON DRIVE

City  
PALM HARBOR

State  
FL

Zip Code  
34683-2125

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FIS

Occupation (for Individual)  
SR. DIRECTOR PRODUCT DEVELOPM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025

**Transaction ID : SA11A.27671020**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

149.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2202 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEYSHON, DAVID, W., MR.,

Mailing Address 1608 HONEYSUCKLE CT

City  
WEST CHESTERState  
PAZip Code  
19380-4361FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SHELF STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

Transaction ID : SA11A.27670717

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LIKE, LINDA, E., MRS.,

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

Transaction ID : SA11A.27670792

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LITTLEJOHN, JAMES, , MR.,

Mailing Address 950 GLENHILL DR.

City  
FREMONTState  
CAZip Code  
94539-5727FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

Transaction ID : SA11A.27669795

Amount of Each Receipt this Period

18.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

64.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2203 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669263

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669268

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669300

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

29.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2204 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669324**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27671130**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.20

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27671134**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2205 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOHMAN, CAROLYN, , ,**

Mailing Address 3229 WALNUT CREEK CT

City  
BRYANState  
TXZip Code  
77807-4852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668280**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LORENZ, ALONAH, , MS.,**

Mailing Address 160 40TH AVE SE

City  
BENSONState  
MNZip Code  
56215-1358FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668580**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOVE, REBECCA, ANN, ,**

Mailing Address 2006 MAGNOLIA BEND

City  
BAYTOWNState  
TXZip Code  
77523-9195FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

618.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668053**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2206 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOWRY, FRED, L., MR., SR.**

Mailing Address 967 PIONEER RD.

City  
DRAPERState  
UTZip Code  
84020-9334FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOWRY & ASSOCIATESOccupation (for Individual)  
SMALL BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1339.30

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670994**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUNDE, ANNESTA, , ,**

Mailing Address 4418 MOUNTWOOD STREET

City  
HOUSTONState  
TXZip Code  
77018-1027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669660**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUTSCHG, VIVIAN, , MRS.,**

Mailing Address 2400 MAPLE ST.

City  
CHADRONState  
NEZip Code  
69337-9369FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.80

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669842**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2207 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LYNCH, JEFFREY, , ,**

Mailing Address 5922 MAPLESHADE LN

City  
DALLASState  
TXZip Code  
75252-2353FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LYNCH LAW FIRMOccupation (for Individual)  
TRIAL LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669404

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MADDIX, JOYE, , ,**

Mailing Address 4065 WEST GRANDVIEW ROAD

City  
SALEMState  
INZip Code  
47167-8274FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PROVIDENCEOccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671033

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAGUIRE, SUSAN, LEE, ,**

Mailing Address P.O. BOX 729

City  
LARAMIEState  
WYZip Code  
82073-0729FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

243.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668581

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

86.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2208 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAGUIRE, SUSAN, LEE, ,**

Mailing Address P.O. BOX 729

City  
LARAMIEState  
WYZip Code  
82073-0729FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668584**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAHAFFEY, JOE, L., MR.,**

Mailing Address PO BOX 314

City  
YELLOW JACKETState  
COZip Code  
81335-0314FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668075**

Amount of Each Receipt this Period

32.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAKENS, DIANA, , ,**

Mailing Address 3103 CENTER POINT RD

City  
FREDERICKSBURGState  
TXZip Code  
78624-8133FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

286.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670852**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2209 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, FRANCES, , ,**

Mailing Address 1500 GENDARME RD

City  
CARENCROState  
LAZip Code  
70520-5507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.49

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669455**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668647**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

412.55

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670743**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

58.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2210 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670764**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670788**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASESSA, ROBERT, , ,**

Mailing Address 1524 STATE RT 23

City  
BUTLERState  
NJZip Code  
07405-1829FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MASESSA AND CLUFFOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668891**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2211 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670308**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670330**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670408**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2212 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.39

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668310**

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASTRO, MABEL, , ,**

Mailing Address 4616 PRAIRIE POINT BOULEVARD

City  
KISSIMMEEState  
FLZip Code  
34746-6364FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

889.10

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670843**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATHEWS, TIMOTHY, , ,**

Mailing Address 388 PALOMARES AVENUE

City  
VENTURAState  
CAZip Code  
93003-1737FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

727.38

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668408**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.20



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2213 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATHEWS, TIMOTHY, , ,**

Mailing Address 388 PALOMARES AVENUE

City  
VENTURAState  
CAZip Code  
93003-1737FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668418**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCLINTOCK, JOHN, , ,**

Mailing Address 770 SANDY RUN RD

City  
YARDLEYState  
PAZip Code  
19067-2923FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KELLER WILLIAMS REAL ESTATEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670425**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCFERRIN, JAMES, W., MR.,**

Mailing Address 125 BEVERLY ROAD NE

City  
ATLANTAState  
GAZip Code  
30309-2655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
U. S. ELECTRICOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669970**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2214 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCFIE, MARSHALL, , DR.,**

Mailing Address 4140 CHURCH HAVEN WAY

City  
ANAHEIMState  
CAZip Code  
92807-3406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670122

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCFIE, MARSHALL, , DR.,**

Mailing Address 4140 CHURCH HAVEN WAY

City  
ANAHEIMState  
CAZip Code  
92807-3406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670393

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCNEILLWEINER, DANA, , ,**

Mailing Address 132 EMERALD BAY

City  
LAGUNA BEACHState  
CAZip Code  
92651-1209FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669284

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

109.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2215 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MELCHER, STEPHEN, , ,**

Mailing Address 2013 OKMULGEE LN

City  
CROSSVILLEState  
TNZip Code  
38572-3439FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668182**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MELVILLE, ROBERT, , MR.,**

Mailing Address 6235 HARMON GREEN AVE

City  
GRANDVILLEState  
MIZip Code  
49418-9732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.91

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668104**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MELVILLE, ROBERT, , MR.,**

Mailing Address 6235 HARMON GREEN AVE

City  
GRANDVILLEState  
MIZip Code  
49418-9732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

443.91

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668111**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2216 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669381**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669385**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.88

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669387**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

14.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2217 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669390**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669394**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669399**

Amount of Each Receipt this Period

18.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2218 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669568**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669571**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.88

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669573**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

14.95

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2219 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEO

State  
CA

Zip Code  
94404-3824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

**Transaction ID : SA11A.27669575**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEO

State  
CA

Zip Code  
94404-3824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

**Transaction ID : SA11A.27669581**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEO

State  
CA

Zip Code  
94404-3824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

**Transaction ID : SA11A.27669582**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

29.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2220 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669834

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669835

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEREDITH, RANDY, , ,**

Mailing Address 266 BULLFINCH ROAD

City  
MOORESVILLEState  
NCZip Code  
28117-5407FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1978.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670908

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.80



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2221 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEREDITH, RANDY, , ,**

Mailing Address 266 BULLFINCH ROAD

City  
MOORESVILLEState  
NCZip Code  
28117-5407FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1978.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670909**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEREDITH, RANDY, , ,**

Mailing Address 266 BULLFINCH ROAD

City  
MOORESVILLEState  
NCZip Code  
28117-5407FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1978.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670911**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERRIAM, NORMAN, , MR.,**

Mailing Address 4212 CLIFF ST.

City  
LARAMIEState  
WYZip Code  
82070-5321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27667987**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

338.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2222 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEYERS-GLYDA, DONNA, , MS.,**

Mailing Address 7512 VALHALLA DRIVE

City  
MAUMEEState  
OHZip Code  
43537-9512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SERENITY REALTYOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.74

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669854**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIDDLETON, JAYNE, , ,**

Mailing Address 2420CREEKWOOD DR

City  
BATON ROUGEState  
LAZip Code  
70808-0115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.98

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668140**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIDDLETON, JOHN, , ,**

Mailing Address 712 RIDGE RD

City  
HIGHLAND PARKState  
ILZip Code  
60035-3834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

429.76

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670779**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

145.49

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2223 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MILLER, BONNIE, F., ,

Mailing Address 14 WILMINGTON WAY

City  
CONROEState  
TXZip Code  
77384-4777FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669798

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, BONNIE, F., ,

Mailing Address 14 WILMINGTON WAY

City  
CONROEState  
TXZip Code  
77384-4777FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669801

Amount of Each Receipt this Period

24.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, PATRICIA, , ,

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670903

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.80

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2224 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELL

State  
NM

Zip Code  
88201-8659

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.16

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025

**Transaction ID : SA11A.27668014**

Amount of Each Receipt this Period

0.19

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELL

State  
NM

Zip Code  
88201-8659

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.16

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025

**Transaction ID : SA11A.27671061**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLS, DANIEL, , ,**

Mailing Address 369 SOUTH LAKE DRIVE

City  
PALM BEACH

State  
FL

Zip Code  
33480-4571

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5505.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025

**Transaction ID : SA11A.27670218**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

51.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2225 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOK, LIMING, , ,**

Mailing Address 29726 COJAK CIRCLE

City  
FAIR OAKS RANCHState  
TXZip Code  
78015-4521FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.89

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27671119**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOK, LIMING, , ,**

Mailing Address 29726 COJAK CIRCLE

City  
FAIR OAKS RANCHState  
TXZip Code  
78015-4521FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.89

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27671120**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOK, LIMING, , ,**

Mailing Address 29726 COJAK CIRCLE

City  
FAIR OAKS RANCHState  
TXZip Code  
78015-4521FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

395.89

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27671123**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

26.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2226 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOK, LIMING, , ,**

Mailing Address 29726 COJAK CIRCLE

City  
FAIR OAKS RANCHState  
TXZip Code  
78015-4521FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.89

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27671125**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOLLOY, JOHN, , ,**

Mailing Address 36 PATIKY STREET

City  
KINGS PARKState  
NYZip Code  
11754-1902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668670**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOMARY, NED, , ,**

Mailing Address 3412 THE STRAND

City  
MANHATTAN BEACHState  
CAZip Code  
90266-3350FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668989**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2227 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668479**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTENEGRO, RAUL, , ,**

Mailing Address 1017 MONTICELLO BLVD N

City  
ST PETERSBURGState  
FLZip Code  
33703-4503FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670166**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRIS, ANJALI, , ,**

Mailing Address 863-C SAN PABLO AVENUE

City  
ALBANYState  
CAZip Code  
94706-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

483.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668835**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2228 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORRIS, ROBERT, E., MR., JR.**

Mailing Address 98 RIVERSIDE AVENUE

City  
RIVERSIDEState  
CTZip Code  
06878-1619FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669347**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOSSMAN , GUY, , ,**

Mailing Address 603 SEAWARD DRIVE

City  
CHARLESTONState  
SCZip Code  
29412-8941FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ORBIS INCOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.20

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668394**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOUNTEER, FAYE, , ,**

Mailing Address 9985N 5320 W

City  
HIGHLANDState  
UTZip Code  
84003-3501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

529.12

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670126**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

356.78



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2229 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOUNTEER, FAYE, , ,**

Mailing Address 9985N 5320 W

City  
HIGHLANDState  
UTZip Code  
84003-3501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670623

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOUNTEER, FAYE, , ,**

Mailing Address 9985N 5320 W

City  
HIGHLANDState  
UTZip Code  
84003-3501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670631

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOUNTEER, FAYE, , ,**

Mailing Address 9985N 5320 W

City  
HIGHLANDState  
UTZip Code  
84003-3501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

529.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670633

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

54.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2230 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOUNTEER, FAYE, , ,**

Mailing Address 9985N 5320 W

City  
HIGHLANDState  
UTZip Code  
84003-3501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670638**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MUELLER, SUSAN, , ,**

Mailing Address 1242 EAST AVENIDA HERMOSA

City  
PHOENIXState  
AZZip Code  
85014-2910FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669402**

Amount of Each Receipt this Period

21.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUFFERI, SAMUEL, C., MR.,**

Mailing Address 6421 MILL RD

City  
EGG HARBOR TWPState  
NJZip Code  
08234-4923FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

301.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670098**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2231 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MULHORN, SHIRLEY, , MS.,**

Mailing Address 875 TEMPLE RD.

City  
CLANTONState  
ALZip Code  
35045-8430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

617.56

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668795**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MULLER, DONNA, , MS.,**

Mailing Address 295 JUDD RD

City  
MILANState  
MIZip Code  
48160-9585FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.10

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668340**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

955.83

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668190**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2232 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668191**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668198**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSEN, PATRICIA, , ,**

Mailing Address 10026 LLEWELLYN COURT

City  
FAIRFAXState  
VAZip Code  
22032-2713FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DODOccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

510.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668546**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2233 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, FRED, E., MR.,**Mailing Address 900 TAMIAMI TRL S  
APT 534City  
VENICEState  
FLZip Code  
34285-3627FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668263**

Amount of Each Receipt this Period

11.88

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, J., SCOTT, ,**

Mailing Address 5540 WEST EL PASO AVENUE

City  
FRESNOState  
CAZip Code  
93722-2788FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670155**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, PAUL, , ,**

Mailing Address 6803 NORTH 68TH PLAZA

City  
OMAHAState  
NEZip Code  
68152-2177FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668234**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2234 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, PAUL, , ,**

Mailing Address 6803 NORTH 68TH PLAZA

City  
OMAHAState  
NEZip Code  
68152-2177FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.18

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668322**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, PAUL, , ,**

Mailing Address 6803 NORTH 68TH PLAZA

City  
OMAHAState  
NEZip Code  
68152-2177FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.18

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669216**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, PAUL, , ,**

Mailing Address 6803 NORTH 68TH PLAZA

City  
OMAHAState  
NEZip Code  
68152-2177FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.18

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669219**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2235 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, PAUL, , ,**

Mailing Address 6803 NORTH 68TH PLAZA

City  
OMAHAState  
NEZip Code  
68152-2177FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.18

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669226**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEMEROFF, EILEEN, , ,**

Mailing Address 20 POND CROSSING

City

SOUTHAMPTON

State

NY

Zip Code

11968-4728

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1332.43

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669096**

Amount of Each Receipt this Period

18.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEMEROFF, EILEEN, , ,**

Mailing Address 20 POND CROSSING

City

SOUTHAMPTON

State

NY

Zip Code

11968-4728

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1332.43

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670561**

Amount of Each Receipt this Period

37.48

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2236 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NESTLEROTH, DAVID, , ,**Mailing Address 12001 MARKET ST  
APT 445City  
RESTONState  
VAZip Code  
20190-6223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JACOBSOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668621**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NICHOLS, CHARLES, , ,**

Mailing Address 14870 DUNLIN COURT

City

MIDDLEFIELD

State

OH

Zip Code

44062-9033

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
POLYCHEMOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669014**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NICHOLS, CHARLES, , ,**

Mailing Address 14870 DUNLIN COURT

City

MIDDLEFIELD

State

OH

Zip Code

44062-9033

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
POLYCHEMOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669041**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

205.08



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2237 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NIELSEN, EARL, , ,**

Mailing Address 10 LIDGERWOOD PLACE

City  
MORRISTOWNState  
NJZip Code  
07960-5736FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MORRISTOWN MEDICAL CENTEROccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669357

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIEMANN, NANCY, , ,**

Mailing Address 18 DOGWOOD RD.

City  
MORRIS PLAINSState  
NJZip Code  
07950-1919FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

853.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670133

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NOBLE, CRISTINA, HEEREN, ,**

Mailing Address 1200 FIFTH AVENUE

City  
NEW YORKState  
NYZip Code  
10029-5208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1168.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670978

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

163.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2238 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

589.96

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669460**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

589.96

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669488**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'NEAL, KAREN, , MS.,**

Mailing Address 8119 WYCOMB DR.

City  
HOUSTONState  
TXZip Code  
77070-3233FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669706**

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

245.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2239 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLBN, DENISE, , ,**

Mailing Address 1861 LILBURN STONE MOUNTAIN ROAD

City  
STONE MOUNTAINState  
GAZip Code  
30087-1700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670350**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLINGER, SANDRA, , ,**

Mailing Address 4914 SW 95TH TER.

City  
GAINESVILLEState  
FLZip Code  
32608-4190FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670026**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLNEY, LINDA, , ,**

Mailing Address PO BOX 194

City  
PRIDES CROSSINGState  
MAZip Code  
01965-0194FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668871**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

240.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2240 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLSON, SHARON, , ,**

Mailing Address 1239 O'LEARY DRIVE

City  
JOLIETState  
ILZip Code  
60431-8954FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668446**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, SHARON, , ,**

Mailing Address 1239 O'LEARY DRIVE

City  
JOLIETState  
ILZip Code  
60431-8954FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668476**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAGEL, ANITA, , ,**

Mailing Address 100 NORTH OLIVE STREET

City  
SAINT ELMOState  
ILZip Code  
62458-1443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PAGEL FUNERAL HOMESOccupation (for Individual)  
FUNERAL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

335.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670247**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2241 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAPPAS, MARY, ALICE, MS.,**

Mailing Address 1617 N FLAGLER DR APT 4A

City  
WEST PALM BEACHState  
FLZip Code  
33407-6506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

**Transaction ID : SA11A.27669549**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAPPAS, MARY, ALICE, MS.,**

Mailing Address 1617 N FLAGLER DR APT 4A

City  
WEST PALM BEACHState  
FLZip Code  
33407-6506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

**Transaction ID : SA11A.27669550**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAPPAS, MARY, ALICE, MS.,**

Mailing Address 1617 N FLAGLER DR APT 4A

City  
WEST PALM BEACHState  
FLZip Code  
33407-6506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

**Transaction ID : SA11A.27669555**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2242 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARKER, BRUCE, E., ,**

Mailing Address 320 IVYWOOD LANE

City  
NAPLESState  
FLZip Code  
34112-7239FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670289**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARKS, JENNIE, , ,**

Mailing Address 386 W TROXELL RD

City  
OAK HARBORState  
WAZip Code  
98277-7909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.93

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668595**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKS, MARTHA, , MS.,**

Mailing Address 2815 SIMONDALE DR.

City  
FORT WORTHState  
TXZip Code  
76109-1255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

895.70

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670749**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2243 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARKS, MARTHA, , MS.,**

Mailing Address 2815 SIMONDALE DR.

City  
FORT WORTHState  
TXZip Code  
76109-1255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

895.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671004**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAULS, ART, , ,**

Mailing Address 20447 NORTH MADERA WAY

City  
SURPRISEState  
AZZip Code  
85374-5050FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668899**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAULS, ART, , ,**

Mailing Address 20447 NORTH MADERA WAY

City  
SURPRISEState  
AZZip Code  
85374-5050FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668903**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

228.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2244 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PECORA, SANDRA, J., MRS.,**

Mailing Address 20 EDGEWATER CT

City  
WAKEMANState  
OHZip Code  
44889-9082FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669988**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PENCE, NANCY, E., MS.,**

Mailing Address 5179 SILVER SAGE DR.

City  
CARSON CITYState  
NVZip Code  
89701-8506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668730**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERRIN, CAROL, , MRS.,**

Mailing Address 16 ROCKY COVE RD

City  
LEXINGTONState  
SCZip Code  
29072-9763FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

921.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668676**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

183.93



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2245 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETITJEAN, SANDRA, , ,**

Mailing Address 6832 TAMARA LANE

City  
ASSARIAState  
KSZip Code  
67416-8875FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670868**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETRONE, DICK, P., ,**

Mailing Address 19958 SW 90TH PLACE

City  
TUALATINState  
ORZip Code  
97062-9494FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670003**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETRONE, DICK, P., ,**

Mailing Address 19958 SW 90TH PLACE

City  
TUALATINState  
ORZip Code  
97062-9494FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670024**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2246 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668043**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669808**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670564**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

28.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2247 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PLUMMER, ROBERT, KEMP, ,**

Mailing Address 4308 VILLAGE DR

City  
TRINITYState  
NCZip Code  
27370-9492FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668442**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PLUMMER, ROBERT, KEMP, ,**

Mailing Address 4308 VILLAGE DR

City  
TRINITYState  
NCZip Code  
27370-9492FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668470**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POHL, MATTHEW, J., MR.,**

Mailing Address 5146 GLEN VERDE DR

City  
BONITAState  
CAZip Code  
91902-2626FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668001**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2248 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POIPAO, RICHARD, , ,**

Mailing Address 2128 INVERNESS DR

City  
SOUTH LAKE TAHOEState  
CAZip Code  
96150-6730FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RCP CONSTRUCTIONOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670701**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POLLARD, ANN, , ,**

Mailing Address 13 INDIGO DR

City  
LAKE PLACIDState  
FLZip Code  
33852-6177FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.98

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668312**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.88

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668662**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

551.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2249 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669081**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670656**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POWERS, ROBERT, , ,**

Mailing Address 1607 JAMESTOWN AVENUE

City  
EVANSState  
GAZip Code  
30809-5454FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670187**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2250 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRINDLE, GLEN, , ,**

Mailing Address 942 DISCOVERY CIR NE

City  
ISSAQUAHState  
WAZip Code  
98029-6203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPUOccupation (for Individual)  
FACILITY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671074

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PROKOP, JOHN, , ,**

Mailing Address 4106 ARJUNA WAY

City

RANCHO CORDOVA

State

CA

Zip Code

95742-8262

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670090

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PURDON, THOMAS, F., MR.,**

Mailing Address 8550 W CONTINENTAL DR

City

PEORIA

State

AZ

Zip Code

85382-2702

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27667975

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2251 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670810**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670815**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670818**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

34.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2252 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670821

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670823

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670824

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.42



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2253 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RADY, PAUL, M., MR.,**

Mailing Address 4 MOCKINGBIRD LN

City  
ENGLEWOODState  
COZip Code  
80113-4813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANTERO RESOURCESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8901.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669297

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RANDALL, HELEN, , ,**

Mailing Address 13249 SW 190TH ST

City  
ROSE HILLState  
KSZip Code  
67133-8519FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669785

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670029

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

284.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2254 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670030

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670040

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670045

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

61.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2255 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670652**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670654**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670660**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2256 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. READ, JEAN, , ,**

Mailing Address 367 RED #ROCK ROAD

City  
WICHITA FALLSState  
TXZip Code  
76305-2817FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668345

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668108

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668109

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

68.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2257 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.70

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668115**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REAGAN, RONALD, C., ,**

Mailing Address 1783 FOUR MILE COVE PKWY

City

CAPE CORAL

State

FL

Zip Code

33990-2409

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.95

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27667966**

Amount of Each Receipt this Period

3.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REEDY, MARY, A., MS.,**

Mailing Address 213 WOODSIDE DR

City

CHILHOWIE

State

VA

Zip Code

24319-5896

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

460.99

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668544**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2258 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REEVES, DONALD, E., MR.,**

Mailing Address 230 8TH ST

City  
SEAL BEACHState  
CAZip Code  
90740-6306FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669510**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RENNHACK, SHARON, , ,**

Mailing Address 1700 NW 74 AVENUE

City  
PLANTATIONState  
FLZip Code  
33313-4404FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.63

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670159**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REYNOLDS, ED, , ,**

Mailing Address PO BOX 539

City  
TAZEWELLState  
VAZip Code  
24651-0539FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
POWER TRACOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

598.75

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670480**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2259 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICE, SUNDAY, , ,**

Mailing Address 2301 BROOKSTONE CENTRE PARKWAY

City  
COLUMBUSState  
GAZip Code  
31904-9248FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SUNDAY COSTOS RICEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668489**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RICE, SUNDAY, , ,**

Mailing Address 2301 BROOKSTONE CENTRE PARKWAY

City  
COLUMBUSState  
GAZip Code  
31904-9248FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SUNDAY COSTOS RICEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668492**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICE, SUNDAY, , ,**

Mailing Address 2301 BROOKSTONE CENTRE PARKWAY

City  
COLUMBUSState  
GAZip Code  
31904-9248FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SUNDAY COSTOS RICEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668497**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2260 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICE, SUNDAY, , ,**

Mailing Address 2301 BROOKSTONE CENTRE PARKWAY

City  
COLUMBUSState  
GAZip Code  
31904-9248FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUNDAY COSTOS RICEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668506

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RICE, SUNDAY, , ,**

Mailing Address 2301 BROOKSTONE CENTRE PARKWAY

City  
COLUMBUSState  
GAZip Code  
31904-9248FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUNDAY COSTOS RICEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668717

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICE, SUNDAY, , ,**

Mailing Address 2301 BROOKSTONE CENTRE PARKWAY

City  
COLUMBUSState  
GAZip Code  
31904-9248FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUNDAY COSTOS RICEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668722

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2261 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICE, SUNDAY, , ,**

Mailing Address 2301 BROOKSTONE CENTRE PARKWAY

City  
COLUMBUSState  
GAZip Code  
31904-9248FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SUNDAY COSTOS RICEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.19

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668726**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669479**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669481**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2262 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669494**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670707**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670778**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.12

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2263 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLE

State  
NC

Zip Code  
28311-7675

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025

**Transaction ID : SA11A.27670794**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLE

State  
NC

Zip Code  
28311-7675

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025

**Transaction ID : SA11A.27670807**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBERTS, KIRBY, C., ,**

Mailing Address 233 HOLIDAY ROAD

City  
WINCHESTER

State  
KY

Zip Code  
40391-1627

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.05

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025

**Transaction ID : SA11A.27668101**

Amount of Each Receipt this Period

3.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2264 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBERTS, KIRBY, C., ,**

Mailing Address 233 HOLIDAY ROAD

City  
WINCHESTERState  
KYZip Code  
40391-1627FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.05

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670820**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROEHR, ALVIN, , ,**

Mailing Address 4765 BURLEY HILLS DRIVE

City  
CINCINNATIState  
OHZip Code  
45243-4007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THE ROEHR AGENCYOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669442**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROEHR, ALVIN, , ,**

Mailing Address 4765 BURLEY HILLS DRIVE

City  
CINCINNATIState  
OHZip Code  
45243-4007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THE ROEHR AGENCYOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669584**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.82

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2265 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROGERS, MARCY, , ,

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668254

Amount of Each Receipt this Period

0.38

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROGERS, MARCY, , ,

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670998

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROGERS, MARCY, , ,

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27671001

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2266 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668392**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668542**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669196**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2267 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668007

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668405

Amount of Each Receipt this Period

0.19

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668481

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2268 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668330**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668419**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUTHER, PATRICIA, M., ,**

Mailing Address 300 CHURCH ST

City  
MATAWANState  
NJZip Code  
07747-1522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670897**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7.13



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2269 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAGALE, MOEIFAGA, , ,**

Mailing Address 7356 TOOMA STREET

City  
SAN DIEGOState  
CAZip Code  
92139-2939FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670567

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAGALE, MOEIFAGA, , ,**

Mailing Address 7356 TOOMA STREET

City  
SAN DIEGOState  
CAZip Code  
92139-2939FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670572

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAGALE, MOEIFAGA, , ,**

Mailing Address 7356 TOOMA STREET

City  
SAN DIEGOState  
CAZip Code  
92139-2939FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670576

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2270 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668250**

Amount of Each Receipt this Period

3.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAULSBERRY, GAREN, , ,**

Mailing Address 4440 LONESOME PINE ROAD

City  
LAS CRUCESState  
NMZip Code  
88007-4566FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PERATONOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668559**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670191**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

41.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2271 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHMIED, PAUL, F., MR.,**

Mailing Address 4 SENECA AVE

City  
GENESE0State  
NYZip Code  
14454-9508FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670177**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHOCHET, JOEL, , ,**Mailing Address 901 S 94TH ST  
APT 112City  
CHANDLERState  
AZZip Code  
85224-1322FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US GOVERNMENT - NLRBOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668427**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHOFIELD, KATHLEEN, S., ,**

Mailing Address 1716 NORTHEAST NORTH STREET

City  
HERMISTONState  
ORZip Code  
97838-1138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

335.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668508**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

317.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2272 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHRANDTHAYWARD, LAURA, , ,**

Mailing Address 545 MATAGUAL

City  
VISTAState  
CAZip Code  
92081-6608FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ADPOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668797**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHWIETERMAN, DALE, , ,**

Mailing Address 3924 COUNTY ROAD 716A

City  
CELINAState  
OHZip Code  
45822-8121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670366**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEIDENSTUCKER, PAUL, H., MR.,**

Mailing Address 10790 ROSE AVE APT 106

City  
LOS ANGELESState  
CAZip Code  
90034-4440FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671116**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

256.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2273 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEITER, JOHN, H., MR.,**

Mailing Address 3293 PADARO LN

City  
CARPINTERIAState  
CAZip Code  
93013-1116FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1166.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668214**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SELL, STEVE, , ,**

Mailing Address 2536 34TH STREET

City  
SAN DIEGOState  
CAZip Code  
92104-5241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669826**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SELL, STEVE, , ,**

Mailing Address 2536 34TH STREET

City  
SAN DIEGOState  
CAZip Code  
92104-5241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

286.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669827**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2274 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SELL, STEVE, , ,**

Mailing Address 2536 34TH STREET

City  
SAN DIEGOState  
CAZip Code  
92104-5241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669828**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SELL, STEVE, , ,**

Mailing Address 2536 34TH STREET

City  
SAN DIEGOState  
CAZip Code  
92104-5241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669830**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEPHTON, GAYLE, , ,**

Mailing Address 150E LAKESHORE DR. #72

City  
LAKE ELSINOREState  
CAZip Code  
92530-4241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669264**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2275 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SERIO, THOMAS, , ,**

Mailing Address 20981 COASTVIEW LN

City  
HUNTINGTON BEACHState  
CAZip Code  
92648-5271FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CEOOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670333**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEWARD, JESSIE, M., DR.,**

Mailing Address 2231 ROBINSON RD NE STE200

City  
MARIETTAState  
GAZip Code  
30068-2289FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670881**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHEA, JAMES, , ,**

Mailing Address 174 CABOT ST

City  
WEST BABYLONState  
NYZip Code  
11704-1121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SHEA TRUCKINGOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670063**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2276 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHEDLOCK, JOHN, , ,**

Mailing Address 10089 IRON MOUNTAIN CT

City  
RANCHO CUCAMONGAState  
CAZip Code  
91737-6831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.50

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669857**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668065**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHIRAR, NANCY, , ,**

Mailing Address 3611 HOGGE DR.

City  
ALLENState  
TXZip Code  
75002-6733FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.10

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669609**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.91



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2277 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669475**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669478**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669480**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2278 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670894

Amount of Each Receipt this Period

1.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670895

Amount of Each Receipt this Period

0.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHOUSE, JERROLD, R., MR.,**

Mailing Address 2555 SOUTH 9TH AVENUE

City  
SAFFORDState  
AZZip Code  
85546-3630FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

328.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668799

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

36.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2279 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHUFF, MARGARET, , ,**Mailing Address 750 S OCEAN BLVD  
2NOCity  
BOCA RATONState  
FLZip Code  
33432-6360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JES PUBLISHINGOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.30

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669393**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIMONIAN, VIC, S., MR.,**

Mailing Address 6 BURNING TREE

City  
LAGUNA NIGUELState  
CAZip Code  
92677-5305FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.10

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669883**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SKIDMORE, MARGARET, , ,**

Mailing Address 3209 EAST LARK STREET

City  
SPRINGFIELDState  
MOZip Code  
65804-6686FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.50

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668712**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

162.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2280 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLAUGHTER, JAMES, G., MR., JR.**

Mailing Address 2128 KILKENNY

City  
PEARLANDState  
TXZip Code  
77581-5167FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
S&B ENGINEERS & CONSTRUCTORSOccupation (for Individual)  
CEO EMERITUS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669026**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLAUGHTER, JAMES, G., MR., JR.**

Mailing Address 2128 KILKENNY

City  
PEARLANDState  
TXZip Code  
77581-5167FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
S&B ENGINEERS & CONSTRUCTORSOccupation (for Individual)  
CEO EMERITUS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669033**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, CAROL, , MS.,**

Mailing Address 6249 INDIAN PATH

City  
SAN ANGELOState  
TXZip Code  
76901-4915FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668909**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

304.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2281 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, KELLY, , ,**

Mailing Address 5800 GRASSMERE LANE

City  
DALLASState  
TXZip Code  
75205-4624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669905

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668329

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669797

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

13.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2282 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27667993**

Amount of Each Receipt this Period

6.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOBOLAK, EDWARD, S., MR.,**

Mailing Address 217 THE HILLS DR.

City  
AUSTINState  
TXZip Code  
78738-1338FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668348**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SODITUS, CONSTANCE, A., ,**

Mailing Address 21608 O. LANE. APT. 116

City  
OCEAN PARKState  
WAZip Code  
98640-3225FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

407.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27667981**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2283 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669632**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669643**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669779**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

196.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2284 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPAETH, EDMUND, , ,**

Mailing Address 26536 LOVE LN

City  
RAMONAState  
CAZip Code  
92065-4822FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670591

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPALLONE, ARLENE, , ,**

Mailing Address 5925 BRAE BURN CIR

City  
VERO BEACHState  
FLZip Code  
32967-5277FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668376

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670642

Amount of Each Receipt this Period

1.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

74.38



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2285 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPEIGHT, CAROL, E., ,**

Mailing Address 1421 HWY 641 SOUTH

City  
PARISState  
TNZip Code  
38242-6750FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670511

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPETH, JEFFREY, , ,**

Mailing Address 393 TRAVELERS RUN

City  
BURLINGTONState  
WIZip Code  
53105-3901FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669552

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEIGER, JEANNE, , MS.,**

Mailing Address 877NEVADA. WYNFORD

City  
BUCYRUSState  
OHZip Code  
44820-9440FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668890

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2286 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEIN, HARRIS, , ,**

Mailing Address 2 TODD COURT

City  
HUNTINGTON STATIONState  
NYZip Code  
11746-4224FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668124**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEIN, HARRIS, , ,**

Mailing Address 2 TODD COURT

City  
HUNTINGTON STATIONState  
NYZip Code  
11746-4224FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671030**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENSON, SCOTT, , ,**

Mailing Address 8924 GUNNISON DRIVE

City  
DALLASState  
TXZip Code  
75231-4812FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669437**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2287 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEWART, WILLIAM, , ,**

Mailing Address 5526 STONEGATE RD

City  
DALLASState  
TXZip Code  
75209-3522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668091**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STODDARD, LYNDIA, C., MS.,**

Mailing Address 208 SPYGLASS LN

City  
JUPITERState  
FLZip Code  
33477-4091FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670025**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STONER, BEVERLY, , ,**

Mailing Address 624 E PRAIRIE ST.

City  
LANARKState  
ILZip Code  
61046-1340FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

389.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670415**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

169.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2288 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STONE, RODNEY, , ,**

Mailing Address 8530 VENICE BOULEVARD

City  
LOS ANGELESState  
CAZip Code  
90034-2549FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENVOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669275**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOUT, GREGORY, , ,**

Mailing Address 1747 TOMMY AARON DR

City  
EL PASOState  
TXZip Code  
79936-4621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.25

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668036**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOUT, GREGORY, , ,**

Mailing Address 1747 TOMMY AARON DR

City  
EL PASOState  
TXZip Code  
79936-4621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.25

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669060**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2289 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STREBECK, JULIA, , ,**

Mailing Address 5315 CR 922

City  
NEVADAState  
TXZip Code  
75173-6161FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668048

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRONEY, PAUL, , MR.,**

Mailing Address 37879 CENTURY LN

City  
AVONState  
OHZip Code  
44011-2179FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CLEVELAND CATHOLIC CHARITIESOccupation (for Individual)  
PHYSICAL THERAPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668535

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STUDINKA, JOYCE, , ,**

Mailing Address 145 WOODMONT DR

City  
BIRMINGHAMState  
ALZip Code  
35209-6627FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

347.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669299

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

265.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2290 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STURGILL, LARRY, , ,**

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668328

Amount of Each Receipt this Period

0.38

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STURGILL, LARRY, , ,**

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668692

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670150

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

51.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2291 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670176**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUHR, J., NICHOLAS, MR.,**

Mailing Address 2006 YELLOWSTONE DR

City

INDIAN LAND

State

SC

Zip Code

29707-3536

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669950**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TANKSLEY, MARILYN, , ,**

Mailing Address 27752 WHISPERWOOD DR

City

MENIFEE

State

CA

Zip Code

92584-8081

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669964**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2292 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TANKSLEY, MARILYN, , ,**

Mailing Address 27752 WHISPERWOOD DR

City  
MENIFEEState  
CAZip Code  
92584-8081FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669978**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TARR, ANNE, , ,**

Mailing Address 13306 SOUTHWALK

City  
SAN ANTONIOState  
TXZip Code  
78232-4843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

987.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669114**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULAState  
MTZip Code  
59804-5849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

562.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668087**

Amount of Each Receipt this Period

2.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.85



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2293 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, KATHLEEN, , ,**

Mailing Address 16 HORIZON LANE

City  
ROCKY MOUNTState  
MOZip Code  
65072-3304FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669326**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THARP, ROBERT, , ,**

Mailing Address 2609 NW 40 ST.

City  
OKLAHOMA CITYState  
OKZip Code  
73112-3704FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668166**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THATCHER, PATRICIA, , ,**

Mailing Address 318 ROSEMARY ST

City  
SMYRNAState  
TNZip Code  
37167-5257FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

324.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669260**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2294 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMAS, AFTON, , MS.,**

Mailing Address 2178 E BENDAMERE CIR

City  
SALT LAKE CITYState  
UTZip Code  
84109-1907FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.92

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669281**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMA, BARBARA, , ,**

Mailing Address 47 CORDOBA POINT

City  
SUNRISE BEACHState  
MOZip Code  
65079-5810FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.79

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669678**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, BONNIE, , ,**

Mailing Address 115 HOLBROOK DR.

City  
HUNTSVILLEState  
ALZip Code  
35806-4084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

512.95

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669760**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2295 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, BONNIE, , ,**

Mailing Address 115 HOLBROOK DR.

City  
HUNTSVILLEState  
ALZip Code  
35806-4084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671068**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, WILLIAM, , MR.,**

Mailing Address 204 MANDALAY

City  
SAN MARCOSState  
TXZip Code  
78666-3631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669149**

Amount of Each Receipt this Period

20.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMSON, PAUL, , MR.,**

Mailing Address 606 CANDLEWOOD DRIVE

City  
CANON CITYState  
COZip Code  
81212-2033FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670012**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2296 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TUGGLE, KATHLEEN, , ,**Mailing Address 2095 HIGHWAY A1A  
4601City  
SATELLITE BEACHState  
FLZip Code  
32937-1803FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668974**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TUTHILL, JOHN, A., MR.,**

Mailing Address 20413 W. 56TH AVE.

City  
GOLDENState  
COZip Code  
80403-8004FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668042**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ULZHEIMER, BOB, , ,**

Mailing Address 4011 GUNNIN ROAD

City  
NORCROSSState  
GAZip Code  
30092-1949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671114**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

137.48

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2297 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UMBARGER, BRENDA, L., ,**

Mailing Address P.O. BOX 1774

City  
FRITCH

State  
TX

Zip Code  
79036-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.56

Date of Receipt

02 / 10 / 2025

**Transaction ID : SA11A.27669154**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. UNDERWOOD, BARBARA, , ,**

Mailing Address 700 CRESTVIEW DRIVE

City  
WOOD RIVER

State  
IL

Zip Code  
62095-3378

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.76

Date of Receipt

02 / 10 / 2025

**Transaction ID : SA11A.27669426**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTE

State  
FL

Zip Code  
33981-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.29

Date of Receipt

02 / 10 / 2025

**Transaction ID : SA11A.27669273**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

47.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2298 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VERDUN, MARGARET, , ,**

Mailing Address 16095 LAMBRUSCO WAY

City  
FISHERSState  
INZip Code  
46037-7372FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27670358**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VERDUN, MARGARET, , ,**

Mailing Address 16095 LAMBRUSCO WAY

City  
FISHERSState  
INZip Code  
46037-7372FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27670568**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VINES, WALTER, , MR.,**

Mailing Address 174 MORRISON AVENUE

City  
STATEN ISLANDState  
NYZip Code  
10310-2835FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FDNYOccupation (for Individual)  
FIRE DEPARTMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02	/	10	/	2025

**Transaction ID : SA11A.27668458**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2299 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VITALI, SONYA, , ,**

Mailing Address 9888 EAST LEGEND COURT

City  
GOLD CANYONState  
AZZip Code  
85118-5891FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669056**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VITALI, SONYA, , ,**

Mailing Address 9888 EAST LEGEND COURT

City  
GOLD CANYONState  
AZZip Code  
85118-5891FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669262**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668217**

Amount of Each Receipt this Period

0.28

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2300 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VOELTZ, SUSAN, , ,**

Mailing Address 3180 N TOUCHMARK BLVD #325

City  
PRESCOTTState  
AZZip Code  
86301-6019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668808

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VOELTZ, SUSAN, , ,**

Mailing Address 3180 N TOUCHMARK BLVD #325

City  
PRESCOTTState  
AZZip Code  
86301-6019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670725

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VOELTZ, SUSAN, , ,**

Mailing Address 3180 N TOUCHMARK BLVD #325

City  
PRESCOTTState  
AZZip Code  
86301-6019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670980

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.88



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2301 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VOELTZ, SUSAN, , ,**

Mailing Address 3180 N TOUCHMARK BLVD #325

City  
PRESCOTTState  
AZZip Code  
86301-6019FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27671026**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WADDELL, JENETTA, , ,**

Mailing Address PO BOX 215

City  
TUSCUMBIAState  
ALZip Code  
35674-0215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BLUE MOUNTAIN CHRISTIAN UNIVERSITYOccupation (for Individual)  
DEAN, SCHOOL OF EDUCATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

643.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668776**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAHMAN, GERALD, , ,**

Mailing Address PO BOX 789

City  
ALMAState  
ARZip Code  
72921-0789FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

577.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669210**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2302 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALDEN, JAMES, A., ,**

Mailing Address 10404 BRIARWOOD CIR

City  
GREENVILLEState  
TXZip Code  
75402-3300FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669160**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKER, LUCINDA, , ,**

Mailing Address 67 IRVING AVENUE, P.O. BOX 507

City  
HYANNIS PORTState  
MAZip Code  
02647-0507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27667999**

Amount of Each Receipt this Period

1.14

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATERFIELD, RICHARD, R., MR., IV**Mailing Address 1 PARK PLAZA  
SUITE 1200City  
IRVINEState  
CAZip Code  
92614-8509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NATIONAL INTERBANKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1980.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670650**

Amount of Each Receipt this Period

990.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1001.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2303 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669038

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27669228

Amount of Each Receipt this Period

1.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATTS SOQUET, L., ANITA, MS.,**

Mailing Address 4155 TUDOR CENTRE DRIVE, SUITE 208

City  
ANCHORAGEState  
AKZip Code  
99508-5912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27668977

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

48.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2304 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEATHERLY, CINDI, , ,**

Mailing Address 4690 MEADOW SPRINGS DRIVE

City  
WATKINSVILLEState  
GAZip Code  
30677-4642FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669247**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTFALL, ANNE, , ,**

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIAState  
WAZip Code  
98531-8894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668244**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WETZEL, JOAN, C., MS.,**

Mailing Address 2508 PINE ST. APT. F

City  
NEW ORLEANSState  
LAZip Code  
70125-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

329.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670651**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.09

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2305 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHEELER, MIEKA, L., ,**

Mailing Address 27230 STONEY BROOK DR

City  
TRENTON

State  
MI

Zip Code  
48183-4640

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.05

Date of Receipt

**02** / **10** / **2025**

**Transaction ID : SA11A.27669405**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITE, LINDA, , ,**

Mailing Address 4433 MOCKINGBIRD LN

City  
DALLAS

State  
TX

Zip Code  
75205-2617

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.00

Date of Receipt

**02** / **10** / **2025**

**Transaction ID : SA11A.27670533**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WICKLINE, RICHARD, , ,**

Mailing Address 1125 MCGEE CT NE  
UNIT 372

City  
SALEM

State  
OR

Zip Code  
97303-9469

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

591.22

Date of Receipt

**02** / **10** / **2025**

**Transaction ID : SA11A.27668945**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

144.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2306 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, CATHERINE, L., ,**

Mailing Address PO BOX 127

City  
SCHERTZState  
TXZip Code  
78154-0127FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668675**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, BRAD, , ,**

Mailing Address 13 HICKORY KNOLL PLACE

City

HILTON HEAD ISLAND

State

SC

Zip Code

29926-2656

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CHARTER ONE REALTYOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27668707**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, JEAN, , ,**

Mailing Address 5644 ARAL DRIVE

City

LAKELAND

State

FL

Zip Code

33805-9615

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669276**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2307 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINGFIELD, REBECCA, C., MRS.,**

Mailing Address 11800 CYPRESS RD

City  
DIXONState  
MOZip Code  
65459-7212FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.75

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669167**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOLF, ARTHUR, , ,**Mailing Address 7767 BRISTOL PARK DR.  
UNIT 4SWCity  
TINLEY PARKState  
ILZip Code  
60477-8717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2605.57

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27671036**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOLF, WALTER, W., MR.,**

Mailing Address 1813 VIEWCREST LANE

City  
SPOKANE VALLEYState  
WAZip Code  
99212-3216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670427**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

179.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2308 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOOD, REBECCA, L., MRS.,**

Mailing Address 656 NE 312 AVE

City  
OLD TOWNState  
FLZip Code  
32680-3312FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MARTEN TRUCKING CO.Occupation (for Individual)  
LONG HAUL TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669792**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, CAROLYN, , ,**

Mailing Address 30 LISA AVE

City  
POPLAR BLUFFState  
MOZip Code  
63901-9094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669094**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, CAROLYN, , ,**

Mailing Address 30 LISA AVE

City  
POPLAR BLUFFState  
MOZip Code  
63901-9094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670171**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.25



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2309 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670140**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, RICHARD, L., ,**

Mailing Address 14416 BEACH RD.

City  
CHESTERFIELDState  
VAZip Code  
23838-2307FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.32

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669775**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WYANDT, YON, , ,**

Mailing Address 3739 SPRING COULEE RD

City  
BELLINGHAMState  
WAZip Code  
98226-8887FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.12

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27668953**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2310 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669671**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27670058**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YANCY, JIMMY, , ,**

Mailing Address 433 CR 303

City  
TAYLORState  
MSZip Code  
38673-4604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669686**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

223.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2311 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNGBLUT, JOANNE, M., DR.,**

Mailing Address 1655 KNUDSON RUN

City  
THE VILLAGESState  
FLZip Code  
32163-5415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670851

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNGBLUT, JOANNE, M., DR.,**

Mailing Address 1655 KNUDSON RUN

City  
THE VILLAGESState  
FLZip Code  
32163-5415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670853

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YOUNGBLUT, JOANNE, M., DR.,**

Mailing Address 1655 KNUDSON RUN

City  
THE VILLAGESState  
FLZip Code  
32163-5415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

347.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670857

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2312 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNGBLUT, JOANNE, M., DR.,**

Mailing Address 1655 KNUDSON RUN

City  
THE VILLAGESState  
FLZip Code  
32163-5415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670858

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNGBLUT, JOANNE, M., DR.,**

Mailing Address 1655 KNUDSON RUN

City  
THE VILLAGESState  
FLZip Code  
32163-5415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670859

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YOUNGBLUT, JOANNE, M., DR.,**

Mailing Address 1655 KNUDSON RUN

City  
THE VILLAGESState  
FLZip Code  
32163-5415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

347.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.27670861

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

39.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2313 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNGBLUT, JOANNE, M., DR.,**

Mailing Address 1655 KNUDSON RUN

City  
THE VILLAGESState  
FLZip Code  
32163-5415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.43

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670862**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNGBLUT, JOANNE, M., DR.,**

Mailing Address 1655 KNUDSON RUN

City  
THE VILLAGESState  
FLZip Code  
32163-5415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.43

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27670865**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YOUNG, PATRICIA, , ,**

Mailing Address 9940 PREMIERE VIEW CIR

City  
HAGERSTOWNState  
MDZip Code  
21740-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.42

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA11A.27669142**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2314 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZAVARZINA, ANYA, , ,**

Mailing Address 802 N DELAWARE ST, 211

City  
SAN MATEOState  
CAZip Code  
94401-1514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GALLIUM ARTISTIC SERVICES SIMSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA11A.27669191**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11C.27672376**

Amount of Each Receipt this Period

98661.27

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABT, OLIVE, MAY, MS.,**

Mailing Address 8700B ARTHUR KNIGHT DR. APT. 206

City  
PERRY HALLState  
MDZip Code  
21128-8026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675736**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2315 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABUID, JULIA, , ,**

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675833**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABUID, JULIA, , ,**

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675834**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675355**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2316 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AIGNER, PETER, , ,**

Mailing Address 5601 SEGOLILLY CIRCLE

City  
LAS VEGASState  
NVZip Code  
89130-0137FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674565**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALIOTO, ROSEANNE, , ,**

Mailing Address 22 HILLIGOSS CT.

City  
PETALUMAState  
CAZip Code  
94952-5742FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673018**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMS, SONJA, , ,**

Mailing Address 27441 N. BLACK CANYON HWY, UNIT 70

City  
PHOENIXState  
AZZip Code  
85085-0016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COUNTRY CLUBOccupation (for Individual)  
ENERGY HEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.18

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675598**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

238.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2317 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMS, SONJA, , ,**

Mailing Address 27441 N. BLACK CANYON HWY, UNIT 70

City  
PHOENIXState  
AZZip Code  
85085-0016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COUNTRY CLUBOccupation (for Individual)  
ENERGY HEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675601

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMS, SONJA, , ,**

Mailing Address 27441 N. BLACK CANYON HWY, UNIT 70

City  
PHOENIXState  
AZZip Code  
85085-0016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COUNTRY CLUBOccupation (for Individual)  
ENERGY HEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675682

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMS, SONJA, , ,**

Mailing Address 27441 N. BLACK CANYON HWY, UNIT 70

City  
PHOENIXState  
AZZip Code  
85085-0016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COUNTRY CLUBOccupation (for Individual)  
ENERGY HEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675686

Amount of Each Receipt this Period

7.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

64.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2318 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMS, SONJA, , ,**

Mailing Address 27441 N. BLACK CANYON HWY, UNIT 70

City  
PHOENIXState  
AZZip Code  
85085-0016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COUNTRY CLUBOccupation (for Individual)  
ENERGY HEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675689**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMYX, PATRICIA, H., MRS.,**

Mailing Address 4382 N ROSEPOINT AVE

City  
MERIDIANState  
IDZip Code  
83646-3702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674778**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMYX, PATRICIA, H., MRS.,**

Mailing Address 4382 N ROSEPOINT AVE

City  
MERIDIANState  
IDZip Code  
83646-3702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674782**

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2319 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMYX, PATRICIA, H., MRS.,**

Mailing Address 4382 N ROSEPOINT AVE

City  
MERIDIANState  
IDZip Code  
83646-3702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.31

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674801**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, BILLIE, R., MRS.,**

Mailing Address 3203 N COTSWOLD MANOR DR.

City  
KINGWOODState  
TXZip Code  
77339-1597FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.71

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674880**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, CYNNIE, , ,**

Mailing Address 55 RODEO AVENUE # 5

City  
SAUSALITOState  
CAZip Code  
94965-1738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.62

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672980**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2320 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, JANET, , MS.,**

Mailing Address 2905 MOCKINGBIRD TRL

City  
CASPERState  
WYZip Code  
82604-3641FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.42

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675072**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, JANET, , MS.,**

Mailing Address 2905 MOCKINGBIRD TRL

City  
CASPERState  
WYZip Code  
82604-3641FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.42

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675103**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, RANDY, H., MR.,**

Mailing Address 335 DEVONSHIRE DR.

City  
BREAState  
CAZip Code  
92821-6010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675559**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

63.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2321 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANGIONE, LARRY, , ,**

Mailing Address 1207 BANGOR ST

City  
SAN DIEGOState  
CAZip Code  
92106-2407FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COASTLINE INTLOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673314**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANGIONE, LARRY, , ,**

Mailing Address 1207 BANGOR ST

City  
SAN DIEGOState  
CAZip Code  
92106-2407FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COASTLINE INTLOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673924**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ARGENTIERI, JOANN, , ,**

Mailing Address BOX 9512

City  
FORT LAUDERDALEState  
FLZip Code  
33310-9512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675478**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

254.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2322 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARGENTINE, PRISCILLA, K., MRS.,**

Mailing Address 207 SPRUCE DR.

City  
MC MURRAYState  
PAZip Code  
15317-3516FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674876**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ASHWORTH, DEAN, , ,**

Mailing Address 12625 N. 18TH PL.

City  
PHOENIXState  
AZZip Code  
85022-5737FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673062**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ASTOR, MARY, , ,**

Mailing Address 2380 NE 193RD ST

City  
MIAMIState  
FLZip Code  
33180-2126FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673222**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

231.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2323 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AUSTIN, PAUL, , ,**

Mailing Address 311 SUGAR BERRY CIRCLE

City  
HOUSTONState  
TXZip Code  
77024-7268FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674818**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAILEY, WANDA, , ,**

Mailing Address 112 SOUTH 10TH AVE

City  
TEAGUEState  
TXZip Code  
75860-1724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673971**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAILEY, WANDA, , ,**

Mailing Address 112 SOUTH 10TH AVE

City  
TEAGUEState  
TXZip Code  
75860-1724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674958**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2324 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAILEY, WANDA, , ,**

Mailing Address 112 SOUTH 10TH AVE

City  
TEAGUEState  
TXZip Code  
75860-1724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674974**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BANGERT, MARILYN, , MRS.,**

Mailing Address 8713 US HWY 85

City  
FORT LUPTONState  
COZip Code  
80621-9309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672984**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BANGERT, MARILYN, , MRS.,**

Mailing Address 8713 US HWY 85

City  
FORT LUPTONState  
COZip Code  
80621-9309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

447.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675052**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.98



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2325 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BANNON, SUZY, , ,**

Mailing Address 3419 VIA LIDO #366

City  
NEWPORT BEACHState  
CAZip Code  
92663-3908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673329

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARNES, KURTH, H., MR.,**

Mailing Address 2720 E 4TH ST APT 321

City  
NATIONAL CITYState  
CAZip Code  
91950-3074FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673250

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARNES, PAUL, , ,**

Mailing Address 338 SUNSHINE WAY

City  
TURLOCKState  
CAZip Code  
95382-7373FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

344.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673532

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2326 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARNES, PAUL, , ,**

Mailing Address 338 SUNSHINE WAY

City  
TURLOCKState  
CAZip Code  
95382-7373FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673570**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672925**

Amount of Each Receipt this Period

2.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BELL, BONNIE, , ,**

Mailing Address 778 1ST ST NW

City  
SAINT PAULState  
MNZip Code  
55112-3216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674542**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

43.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2327 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BELL, SAMUEL, , ,**

Mailing Address 3825 SWEET MAGNOLIA DR.

City  
GAINESVILLEState  
GAZip Code  
30504-5949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.64

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673970**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERLIN, STEVEN, , ,**

Mailing Address 12407 DOVER RD

City  
REISTERSTOWNState  
MDZip Code  
21136-5607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.75

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673268**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERLIN, STEVEN, , ,**

Mailing Address 12407 DOVER RD

City  
REISTERSTOWNState  
MDZip Code  
21136-5607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

452.75

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673391**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2328 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BHOGAL, RABI, , ,**

Mailing Address 8200 STOCKDALE HWAY M-10-298

City  
BAKERSFIELDState  
CAZip Code  
93311-1091FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674921

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BIDDLE, GARY, , ,**

Mailing Address 15 BIDDLE ROAD

City  
CARLISLEState  
PAZip Code  
17015-9794FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SAMTECOccupation (for Individual)  
ENGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675707

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BISHOP, GLORIA, , ,**

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGOState  
ORZip Code  
97034-7595FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673496

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

202.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2329 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BISHOP, GLORIA, , ,**

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGO

State  
OR

Zip Code  
97034-7595

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.23

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27673498**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BISHOP, GLORIA, , ,**

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGO

State  
OR

Zip Code  
97034-7595

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.23

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27673499**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BISHOP, GLORIA, , ,**

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGO

State  
OR

Zip Code  
97034-7595

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.23

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27673502**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

15.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2330 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACK, ROBERT, B., MR.,**

Mailing Address 65 SOUTH BATTERY

City  
CHARLESTONState  
SCZip Code  
29401-2325FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1308.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673750**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOHLEN, LEE, , ,**

Mailing Address 6971 HERITAGE PARKWAY

City  
WESTState  
TXZip Code  
76691-2314FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673294**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOLIN, BOB, , ,**

Mailing Address BOX 368

City  
CHANDLERState  
TXZip Code  
75758-0368FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NEWPORTGROUPOccupation (for Individual)  
ACTUARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

314.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673464**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

253.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2331 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BONIN, JUDY, , ,**

Mailing Address 187 EDGEFIELD LANE

City  
STAUNTONState  
VAZip Code  
24401-6287FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
HORSE BOARDING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672983**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675049**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOSTIC, JAMES, , ,**

Mailing Address 5455 NEW WELLINGTON CLOSE

City  
ATLANTAState  
GAZip Code  
30327-4877FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673152**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2332 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOSTIC, JAMES, , ,**

Mailing Address 5455 NEW WELLINGTON CLOSE

City  
ATLANTAState  
GAZip Code  
30327-4877FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.43

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673156**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674570**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOULINEAU, EDWARD, C., MR.,**

Mailing Address 100 CIRCLE DR

City  
STATESBOROState  
GAZip Code  
30461-0578FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

756.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673685**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

184.90



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2333 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYD, BONNIE, J., ,**

Mailing Address 8656 SUNNYSLOPE DR.

City  
SAN GABRIELState  
CAZip Code  
91775-1129FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675830**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, PAMELA, , ,**

Mailing Address 3703 LAKE EDGE DRIVE

City  
SUWANEEState  
GAZip Code  
30024-7415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673569**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRACKEN, KAY, , ,**

Mailing Address 405 HAMVASY

City  
TYLERState  
TXZip Code  
75701-5324FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRACKEN INTERESTOccupation (for Individual)  
OIL AND GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2334.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674427**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.70

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2334 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRADDOCK, DAVID, , ,**

Mailing Address P O BOX 601176

City  
DALLAS

State  
TX

Zip Code  
75360-1176

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

928.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

**Transaction ID : SA11A.27672610**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRADSHAW, JEANIE, , ,**

Mailing Address 251 SMOKERISE TRACE

City  
PEACHTREE CITY

State  
GA

Zip Code  
30269-1301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

**Transaction ID : SA11A.27673245**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRADSHAW, JEANIE, , ,**

Mailing Address 251 SMOKERISE TRACE

City  
PEACHTREE CITY

State  
GA

Zip Code  
30269-1301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

276.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

**Transaction ID : SA11A.27675697**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

58.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2335 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRADSHAW, JEANIE, , ,**

Mailing Address 251 SMOKERISE TRACE

City  
PEACHTREE CITYState  
GAZip Code  
30269-1301FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.86

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675702**

Amount of Each Receipt this Period

0.57

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRASIE, DONALD, R., MR.,**

Mailing Address 4860 LONE OAK CT

City  
ANN ARBORState  
MIZip Code  
48108-8575FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.05

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673218**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRICKER, DONALD, , ,**

Mailing Address 1532 CR 222

City  
DURANGOState  
COZip Code  
81303-8101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

745.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673870**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2336 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRONSON, CAROL, , ,**

Mailing Address 760 SURREY HILL WAY

City  
ROCHESTERState  
NYZip Code  
14623-3055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673528

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675313

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675795

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2337 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRUCE, THOMAS, , ,**

Mailing Address 191 JEFFERSON CROSSING WAY

City  
CHARLES TOWNState  
WVZip Code  
25414-4921FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.16

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672694**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRUCE, THOMAS, , ,**

Mailing Address 191 JEFFERSON CROSSING WAY

City  
CHARLES TOWNState  
WVZip Code  
25414-4921FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.16

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672696**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRYAN, NATHAN, , ,**

Mailing Address 340 LIVE OAK ROAD

City  
PAICINESState  
CAZip Code  
95043-9718FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PINNACLES TELEPHONE CO.Occupation (for Individual)  
TELECOMMUNICATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

211.99

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673662**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.31

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2338 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRYAN, NATHAN, , ,**

Mailing Address 340 LIVE OAK ROAD

City  
PAICINES

State  
CA

Zip Code  
95043-9718

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PINNACLES TELEPHONE CO.

Occupation (for Individual)  
TELECOMMUNICATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.99

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27673670**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRYAN, NATHAN, , ,**

Mailing Address 340 LIVE OAK ROAD

City  
PAICINES

State  
CA

Zip Code  
95043-9718

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PINNACLES TELEPHONE CO.

Occupation (for Individual)  
TELECOMMUNICATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.99

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27673680**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITY

State  
NJ

Zip Code  
08226-2367

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

553.96

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27675262**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

72.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2339 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUCKLEW, TERRENCE, , MR.,**

Mailing Address 721 CORONADO AVE

City  
CORONADOState  
CAZip Code  
92118-2033FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673342**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUNN, KAY, , ,**

Mailing Address 1908 GAINESWOOD DR

City  
TUSCALOOSAState  
ALZip Code  
35406-3558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.15

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673120**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUNN, KAY, , ,**

Mailing Address 1908 GAINESWOOD DR

City  
TUSCALOOSAState  
ALZip Code  
35406-3558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

335.15

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673226**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2340 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUNN, KAY, , ,**

Mailing Address 1908 GAINESWOOD DR

City  
TUSCALOOSAState  
ALZip Code  
35406-3558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675271**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURNS, MICHAEL, J., ,**

Mailing Address 7287 HORIZON DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675723**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BYRD, FAREL, J., MR.,**

Mailing Address 986 SUGAR LANE

City  
COLLIERVILLEState  
TNZip Code  
38017-8645FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FAREL BYRD, CPA, PAOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672927**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

39.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2341 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CADICAMO, EVELYN, M., MRS.,**

Mailing Address 43577 SERENITY DR

City  
NORTHVILLEState  
MIZip Code  
48167-8932FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.71

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674948**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARBO, LINDA, , ,**

Mailing Address 23 SHIRRA AVENUE

City  
STATEN ISLANDState  
NYZip Code  
10314-4986FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.16

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672478**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARLSON, CYNTHIA, , ,**

Mailing Address 1404 HONEY LN

City  
KOKOMOState  
INZip Code  
46902-3920FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.05

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675238**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2342 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

**Transaction ID : SA11A.27673241**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

**Transaction ID : SA11A.27673333**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

**Transaction ID : SA11A.27675110**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

16.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2343 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARTER, SHELLY, , ,**

Mailing Address 1331 FLETCHER RIDGE RD

City  
SELIGMANState  
MOZip Code  
65745-7517FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FS TAKE OFF PARTS INCOccupation (for Individual)  
SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674141

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CERNUDA, HERMINIO, L., MR.,**

Mailing Address 5320 SW 5TH TER

City  
CORAL GABLESState  
FLZip Code  
33134-1126FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675308

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAKNIS, GEORGE, , ,**

Mailing Address 616 SEA OATS DR

City  
DESTINState  
FLZip Code  
32541-2418FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673735

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

119.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2344 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANCELLOR CASE, NANCY, J., MS.,**Mailing Address 24001 CINCO VILLAGE CENTER BLVD  
APT 1134City  
KATYState  
TXZip Code  
77494-8420FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1082.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672404

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHAVERA, OFILIA, , ,**

Mailing Address 3100 TWISTED CREEK

City

SAN ANTONIO

State

TX

Zip Code

78230-4046

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1048.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673100

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAVERA, OFILIA, , ,**

Mailing Address 3100 TWISTED CREEK

City

SAN ANTONIO

State

TX

Zip Code

78230-4046

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1048.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673605

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2345 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHAVERA, OFILIA, , ,**

Mailing Address 3100 TWISTED CREEK

City  
SAN ANTONIO

State  
TX

Zip Code  
78230-4046

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1048.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

**Transaction ID : SA11A.27675765**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CIMALA, ROBERT, , ,**

Mailing Address 1501 BURR RIDGE CLUB

City  
BURR RIDGE

State  
IL

Zip Code  
60527-5252

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

**Transaction ID : SA11A.27674906**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CITRON, DIANE, M., MRS.,**

Mailing Address 2620 ARIZONA AVE, APT 3

City  
SANTA MONICA

State  
CA

Zip Code  
90404-1415

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

613.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

**Transaction ID : SA11A.27675069**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

158.05

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2346 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLARK, BARBARA, W., MRS.,**

Mailing Address 1170 GORDON COMBS RD NW

City  
MARIETTA

State  
GA

Zip Code  
30064-1226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ELEGANT IDEAS INC.

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.22

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27672730**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COFFARO, MARILYN, , ,**

Mailing Address 10460 PROGRESS WAY  
RM 803

City  
HARRISON

State  
OH

Zip Code  
45030-0030

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27674434**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COKER, RUTH, J., MS.,**

Mailing Address P.O. BOX 814

City  
ROOSEVELT

State  
AZ

Zip Code  
85545-0814

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

380.08

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27673420**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

132.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2347 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.49

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672627**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COMMONS, DONNA, , ,**

Mailing Address 2728 LAKE SHORE BLVD

City

JACKSONVILLE

State

FL

Zip Code

32210-5337

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674634**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORDELL, KENNY, , ,**

Mailing Address 107 PARKVIEW WAY

City

NEWTOWN SQUARE

State

PA

Zip Code

19073-2254

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.66

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672690**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2348 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORLE, PATRICIA, , ,**

Mailing Address 2833 ASH RIDGE DR

City  
DAYTONState  
OHZip Code  
45434-5894FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674160**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COUCH, MARILYN, , ,**Mailing Address 2232 42ND AVENUE SE  
UNIT 577City  
SALEMState  
ORZip Code  
97317-6179FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672490**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COVEY, BOBBY, , ,**

Mailing Address 17110 LEDGEFIELD

City  
CYPRESSState  
TXZip Code  
77433-2062FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674944**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

340.98



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2349 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COYNE, BILL, , ,**

Mailing Address 1912 GALAXY DRIVE

City  
NEWPORT BEACHState  
CAZip Code  
92660-3827FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOUTHBAY TOYOTAOccupation (for Individual)  
AUTO SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674811**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673244**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675399**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

341.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2350 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CREEKMORE, CHARLES, , ,**

Mailing Address 4480 BELLA VISTA CIRCLE

City  
FARMINGTONState  
NMZip Code  
87401-9200FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CONOCOPHILLIPSOccupation (for Individual)  
LANDMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.30

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674062**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CREEL, DEBBIE, , ,**

Mailing Address 11 BURNING TREE COURT

City  
LAS VEGASState  
NVZip Code  
89113-1329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673118**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CROUCH, DENNIS, E., COL., USAF RET**

Mailing Address 3069 RANCHFIELD DR

City  
BEAVERCREEKState  
OHZip Code  
45432-2610FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675369**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2351 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CROWDER, JIMMIE, K., MR.,**

Mailing Address 711 N. BRUNSWICK AVE.

City  
SOUTH HILLState  
VAZip Code  
23970-1515FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROWDER-HITE-CREWSOccupation (for Individual)  
FUNERAL DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674563**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CUELLAR, IGNACIO, , ,**

Mailing Address 305 DEERWOOD DRIVE

City  
SAN MARCOSState  
TXZip Code  
78666-1216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674508**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CUKJATI, JOSEPH, F., MR.,**Mailing Address P.O. BOX 677  
STE 115City  
VENUSState  
TXZip Code  
76084-0677FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

985.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672701**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2352 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CUKJATI, JOSEPH, F., MR.,**Mailing Address P.O. BOX 677  
STE 115City  
VENUSState  
TXZip Code  
76084-0677FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

985.74

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673036**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CULLEN, MERCEDES, , MRS.,**

Mailing Address 8610 125TH ST

City

RICHMOND HILL

State

NY

Zip Code

11418-2643

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675298**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURRAN, WILLIAM, , ,**

Mailing Address 4601 HEY A1A

City

VERO BEACH

State

FL

Zip Code

32963-

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.90

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674248**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

169.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2353 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURRY, ROBERT, J., ,**

Mailing Address 1205 ANDTE CIR.

City  
CLAREMOREState  
OKZip Code  
74017-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.13

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675560**

Amount of Each Receipt this Period

71.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURTIS, SUSAN, , ,**Mailing Address 19501 40TH AVE W  
UNIT 519City  
LYNNWOODState  
WAZip Code  
98036-5976FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675773**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURTIS, SUSAN, , ,**Mailing Address 19501 40TH AVE W  
UNIT 519City  
LYNNWOODState  
WAZip Code  
98036-5976FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

430.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675774**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2354 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURTIS, SUSAN, , ,**Mailing Address 19501 40TH AVE W  
UNIT 519City  
LYNNWOODState  
WAZip Code  
98036-5976FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675775**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAGEL, CAROL, K., ,**

Mailing Address 46356 166TH ST

City  
WATERTOWNState  
SDZip Code  
57201-8767FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
OWNER OPERATOR DAGEL FARMSOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672846**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DALLAVERDE, ANGELO, , ,**

Mailing Address 20A HEISZ ST

City  
KINGSTONState  
PAZip Code  
18704-4453FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

331.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675832**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2355 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAMUTH, GARY, T., ,**

Mailing Address 8010 CANHAM RANCH

City  
SAN ANTONIOState  
TXZip Code  
78266-2910FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DAMUTH HOMES INCOccupation (for Individual)  
CARPENTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.18

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675269**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAMUTH, GARY, T., ,**

Mailing Address 8010 CANHAM RANCH

City  
SAN ANTONIOState  
TXZip Code  
78266-2910FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DAMUTH HOMES INCOccupation (for Individual)  
CARPENTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.18

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675311**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAOUST, THOMAS, , ,**

Mailing Address 1241 BOYDEN PL NW

City  
CONCORDState  
NCZip Code  
28027-8088FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.29

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675649**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2356 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAOUST, THOMAS, , ,**

Mailing Address 1241 BOYDEN PL NW

City  
CONCORDState  
NCZip Code  
28027-8088FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675650

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAOUST, THOMAS, , ,**

Mailing Address 1241 BOYDEN PL NW

City  
CONCORDState  
NCZip Code  
28027-8088FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675651

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675454

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

164.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2357 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAY, MICHAEL, F., ,**

Mailing Address 253 FARR AVE

City  
WADSWORTHState  
OHZip Code  
44281-2146FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MDE,LLCOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673549

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674336

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEL CARLO, GARY, , ,**

Mailing Address 1621 WAVERLY COURT

City  
TRACYState  
CAZip Code  
95376-2906FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HFSOccupation (for Individual)  
PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672557

Amount of Each Receipt this Period

130.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

280.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2358 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DELISLE, CYNTHIA, , ,**

Mailing Address 5850 NW 165TH ST

City  
TRENTONState  
FLZip Code  
32693-7844FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.61

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675635**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DELISLE, CYNTHIA, , ,**

Mailing Address 5850 NW 165TH ST

City  
TRENTONState  
FLZip Code  
32693-7844FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.61

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675638**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DENEUI, TODD, , ,**

Mailing Address 3560 KIRKLEES RD

City  
WINSTON SALEMState  
NCZip Code  
27104-1712FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE INVESTMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672538**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

167.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2359 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DESSAUER, MARILYNN, , ,**

Mailing Address 8679 BLUE FLAG WAY

City  
NAPLESState  
FLZip Code  
34109-4300FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.61

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672891**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DESTEFANO, JUDY, , ,**

Mailing Address 13280 MARSH LNDG

City  
WEST PALM BEACHState  
FLZip Code  
33418-7532FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.10

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674648**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEVOS, DONNA, , ,**

Mailing Address 2495 N. BUNCHGRASS DRIVE

City  
POST FALLSState  
IDZip Code  
83854-7025FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DEVOS REALTYOccupation (for Individual)  
MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675286**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

206.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2360 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIBARTOLOMEO, BETTY, M., MS.,**

Mailing Address 135 OAKMONT CIR.

City  
PINEHURSTState  
NCZip Code  
28374-8342FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673880

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIEZ, ROBERT, A., MR.,**

Mailing Address 1111 TINSMAN RD

City  
FENTONState  
MIZip Code  
48430-1679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUPREME GEAROccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675724

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIONNE, DOUGLAS, , ,**

Mailing Address 6122 WINDY KNL

City  
WINDCRESTState  
TXZip Code  
78239-2655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

536.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675444

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

44.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2361 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIONNE, DOUGLAS, , ,**

Mailing Address 6122 WINDY KNL

City  
WINDCRESTState  
TXZip Code  
78239-2655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.40

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675501**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOBBIE, ANN, , ,**

Mailing Address 163 WEST STERLING POND CIRCLE

City  
SPRINGState  
TXZip Code  
77382-1006FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PET SITTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.08

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672653**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOBBIE, ANN, , ,**

Mailing Address 163 WEST STERLING POND CIRCLE

City  
SPRINGState  
TXZip Code  
77382-1006FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PET SITTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.08

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672655**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2362 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOBBIE, ANN, , ,**

Mailing Address 163 WEST STERLING POND CIRCLE

City  
SPRINGState  
TXZip Code  
77382-1006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PET SITTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672659

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOBBIE, ANN, , ,**

Mailing Address 163 WEST STERLING POND CIRCLE

City  
SPRINGState  
TXZip Code  
77382-1006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PET SITTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672661

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOBBIE, ANN, , ,**

Mailing Address 163 WEST STERLING POND CIRCLE

City  
SPRINGState  
TXZip Code  
77382-1006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PET SITTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672664

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

171.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2363 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DRONE, DARLENE, , ,**

Mailing Address 11700 SOUTHWIND RD

City  
RIDGWAYState  
ILZip Code  
62979-2424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.96

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672680**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRONE, DARLENE, , ,**

Mailing Address 11700 SOUTHWIND RD

City  
RIDGWAYState  
ILZip Code  
62979-2424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.96

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673506**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUGAS, ROLAND, , MR.,**

Mailing Address 408 ELYSIAN FIELDS DR

City  
LAFAYETTEState  
LAZip Code  
70508-6058FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.87

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673797**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2364 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUGAS, ROLAND, , MR.,**

Mailing Address 408 ELYSIAN FIELDS DR

City  
LAFAYETTEState  
LAZip Code  
70508-6058FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.87

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673854**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUGUIG, LINDA, , ,**

Mailing Address 227 ROLLING KNOLL DRIVE

City  
BEL AIRState  
MDZip Code  
21014-5632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.64

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674300**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUGUIG, LINDA, , ,**

Mailing Address 227 ROLLING KNOLL DRIVE

City  
BEL AIRState  
MDZip Code  
21014-5632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.64

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674309**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.54



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2365 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EACK, CRYSTAL, , ,**

Mailing Address 691 IONE AVENUE NORTHEAST

City  
SPRING LAKE PARKState  
MNZip Code  
55432-1146FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675825

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EADEH, LESLIE, , ,**

Mailing Address 664 PUGH RD

City  
WAYNEState  
PAZip Code  
19087-1909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674123

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EASH, ESTHER, , ,**

Mailing Address 420 VILLAGE LN

City  
SOUTH HUTCHINSONState  
KSZip Code  
67505-1734FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

736.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673494

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

312.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2366 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674989**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ECHOLS, DON, , ,**

Mailing Address 3461 JERROLD BLVD

City

BRUNSWICK

State

OH

Zip Code

44212-2225

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673367**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ECHOLS, MARCIA, , ,**

Mailing Address 107 WATERWOOD

City

HUNTSVILLE

State

TX

Zip Code

77320-9665

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675097**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

187.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2367 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EDWARDS, KEVIN, , ,**

Mailing Address 6153 FAIRLAWN DRIVE SW

City  
LAKEWOODState  
WAZip Code  
98499-2433FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TRANSERVICE LOGISTICSOccupation (for Individual)  
COMMERCIAL DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672456**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELDRIDGE, ADELE, , ,**

Mailing Address 3800 AARON COVE

City  
BARTLETTState  
TNZip Code  
38135-1929FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673161**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELIASSEN, JAMES, M., DR.,**

Mailing Address 1205 20TH ST SO

City  
VIRGINIAState  
MNZip Code  
55792-3724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675732**

Amount of Each Receipt this Period

45.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2368 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672773

Amount of Each Receipt this Period

20.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672774

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672777

Amount of Each Receipt this Period

27.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2369 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672779

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672788

Amount of Each Receipt this Period

20.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673023

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.84

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2370 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673025

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673026

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673030

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2371 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FALLON, JOHN, , ,**

Mailing Address 2702 DOUGLAS AVE  
#125

City  
DALLAS

State  
TX

Zip Code  
75219-3456

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.10

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27674518**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FALLON, JOHN, , ,**

Mailing Address 2702 DOUGLAS AVE  
#125

City  
DALLAS

State  
TX

Zip Code  
75219-3456

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.10

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27674594**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FANELLI, GLEN, HUNT, ,**

Mailing Address 11560 WOODBANK PLWY

City  
TUSCALOOSA

State  
AL

Zip Code  
35403-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.36

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27672721**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

87.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2372 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.12

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673150**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.12

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674114**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FAULL, DONNA, M., ,**

Mailing Address 502EAST SUMMIT STREET

City  
NORMALState  
ILZip Code  
61761-1430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.38

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672618**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.85



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2373 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FERNANDEZ, RODRIGO, J., MR.,**

Mailing Address 641 COUNTRY CLUB LANE

City  
CORONADOState  
CAZip Code  
92118-2035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2025

**Transaction ID : SA11A.27674364**

Amount of Each Receipt this Period

114.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFFState  
AZZip Code  
86005-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2025

**Transaction ID : SA11A.27673883**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFFState  
AZZip Code  
86005-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

709.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2025

**Transaction ID : SA11A.27674048**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

134.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2374 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFFState  
AZZip Code  
86005-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.05

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674076**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FREDENBURG, CAROL, , ,**

Mailing Address 10924 RIVER PLANTATION DR.

City  
AUSTINState  
TXZip Code  
78747-1495FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.84

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675267**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FREDENBURG, CAROL, , ,**

Mailing Address 10924 RIVER PLANTATION DR.

City  
AUSTINState  
TXZip Code  
78747-1495FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.84

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675276**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2375 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRUGE, RUBY, JOYCE, ,**

Mailing Address 2004 HIGHWAY 103

City  
PORT BARREState  
LAZip Code  
70577-5310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

751.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673197**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675242**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GERGEN-WISNER, MICHELLE , , ,**

Mailing Address P.O. BOX 368

City  
ESTES PARKState  
COZip Code  
80517-0368FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674472**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2376 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIST, JOEL, , ,

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674759

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIST, JOEL, , ,

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674808

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIUGLIANO, ROBERT, , ,

Mailing Address 2202 BUCKHOLT STREET

City  
PEARLANDState  
TXZip Code  
77581-6218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675209

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

64.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2377 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLADUE, CRAIG, , ,**

Mailing Address 1061 S SPRUCE AVE

City  
BLOOMINGTONState  
CAZip Code  
92316-1531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674925**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLENN, SAMUEL, , , JR.**Mailing Address 5490 ARBOR BRANCH DR.  
APT 234City  
SHALLOTTEState  
NCZip Code  
28470-6111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675091**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLOVER, AVERIL, , ,**

Mailing Address 446 LANCASHIRE RUN

City  
SMITHFIELDState  
NCZip Code  
27577-8029FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675679**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2378 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOBER, RACHELL, , ,**

Mailing Address 1631 OCEAN BLVD

City  
ATLANTIC BEACHState  
NYZip Code  
11509-1597FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.30

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674569**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674652**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, LOUISE, , ,**

Mailing Address 4075 BROOKS MILL DRIVE

City  
LITHONIAState  
GAZip Code  
30038-4143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1230.59

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672687**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2379 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREENWOOD, RICHARD, , ,**

Mailing Address 3170 CHATEAU RD #59

City  
MAMMOTH LAKESState  
CAZip Code  
93546-9857FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673139**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREINER, MICHAEL, J., ,**

Mailing Address PO BOX 621

City  
MARSTONS MILLSState  
MAZip Code  
02648-0621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673988**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRISSOM, LINDA, , ,**

Mailing Address 1598 LEISURE WORLD

City  
MESAState  
AZZip Code  
85206-2315FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AWRCOccupation (for Individual)  
NURSE PRACTITIONER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

351.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673836**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2380 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRUBBS, JANIECE, , MS.,**

Mailing Address 9704 PAVILION DR.

City  
BAKERSFIELDState  
CAZip Code  
93312-5988FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674054

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUDORF, KENNETH, , ,**

Mailing Address 970 CAPE MARCO DR.

City  
MARCO ISLANDState  
FLZip Code  
34145-6399FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1716.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674272

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUNN, LAURA, , ,**

Mailing Address 64 ZACCHEUS MEAD LANE

City  
GREENWICHState  
CTZip Code  
06831-3752FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673681

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

154.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2381 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUNNIN, THOMAS, , MR.,**

Mailing Address 23607 LAST RUN

City  
SAN ANTONIOState  
TXZip Code  
78260-4901FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

GUNNIN INSURANCE &amp; RISK MANAGEMENT, IN

Occupation (for Individual)

INSURANCE BROKERAGE OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674613**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMILTON, BERNARD, H., ,**

Mailing Address 1001 JOSEPHINE CRESCENT

City  
VIRGINIA BEACHState  
VAZip Code  
23464-3918FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674001**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMILTON, BERNARD, H., ,**

Mailing Address 1001 JOSEPHINE CRESCENT

City  
VIRGINIA BEACHState  
VAZip Code  
23464-3918FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

279.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674014**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

198.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2382 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMLIN, DENNIS, , ,**

Mailing Address 18735 CORSINI DRIVE

City  
SAN ANTONIOState  
TXZip Code  
78258-1629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674055**

Amount of Each Receipt this Period

10.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSON, BOB, , ,**

Mailing Address 1326 HICKORYCREEK CT.

City  
WICHITAState  
KSZip Code  
67235-7000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WEIGAND OMEGA MGTOccupation (for Individual)  
PROPERTY MGT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

841.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675522**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRIS, DIANE, , ,**

Mailing Address 5021 WEST 4075 SOUTH

City  
WEST HAVENState  
UTZip Code  
84401-9386FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674885**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2383 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672395

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672407

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672408

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.17

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2384 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672409

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672411

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672416

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

113.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2385 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672428

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672432

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672434

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2386 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672435

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672437

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672439

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

112.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2387 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672440

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672441

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672442

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

116.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2388 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672444

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672446

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672448

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.52



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2389 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465-7933FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672454**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARROLD, JOHN, , ,**

Mailing Address 1829 LAUREL OAK DRIVE

City  
MODESTOState  
CAZip Code  
95354-1648FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674304**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672667**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2390 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672668**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672670**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672671**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2391 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674102**

Amount of Each Receipt this Period

0.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAYS, CHARLES, RAYMOND, MR.,**

Mailing Address 3100 BROOKHILL DR.

City  
BIRMINGHAMState  
ALZip Code  
35242-3702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673737**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAYS, GEORGE, , ,**

Mailing Address PO BOX 142

City  
YACOLTState  
WAZip Code  
98675-0299FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673806**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.17

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2392 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAYS, GEORGE, , ,**

Mailing Address PO BOX 142

City  
YACOLTState  
WAZip Code  
98675-0299FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.02

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673813**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEGWER, ELLEN, R., MS.,**

Mailing Address 76504 VIA CHIANTI

City  
INDIAN WELLSState  
CAZip Code  
92210-7808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.13

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672665**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEGWER, ELLEN, R., MS.,**

Mailing Address 76504 VIA CHIANTI

City  
INDIAN WELLSState  
CAZip Code  
92210-7808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

607.13

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672735**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2393 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HELFRICH, STEVEN, , ,**

Mailing Address 1911 COVEY TRACE ROAD

City  
LA GRANGEState  
KYZip Code  
40031-9248FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673195**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEMBREE, WILLIAM, L., MR.,**

Mailing Address 2626 BLUE MOUNTAIN TRL

City  
LYONSState  
COZip Code  
80540-8461FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675418**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENDERSON, MARGARET, , ,**

Mailing Address 10333 ARVIN HILL RD

City  
AUBREYState  
TXZip Code  
76227-6848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

337.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672578**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

239.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2394 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENDERSON, MARGARET, , ,**

Mailing Address 10333 ARVIN HILL RD

City  
AUBREYState  
TXZip Code  
76227-6848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672594**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENSON, STEVE, , ,**

Mailing Address 224 W. BALD HEAD WYND

City  
SOUTHPORTState  
NCZip Code  
28461-5131FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673919**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILES, SHELLEY, , ,**

Mailing Address 2737 COUNTY STREET 2950

City  
BLANCHARDState  
OKZip Code  
73010-4231FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673798**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2395 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILES, SHELLEY, , ,**

Mailing Address 2737 COUNTY STREET 2950

City  
BLANCHARDState  
OKZip Code  
73010-4231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673801**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILES, SHELLEY, , ,**

Mailing Address 2737 COUNTY STREET 2950

City  
BLANCHARDState  
OKZip Code  
73010-4231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673803**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILES, SHELLEY, , ,**

Mailing Address 2737 COUNTY STREET 2950

City  
BLANCHARDState  
OKZip Code  
73010-4231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673812**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2396 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673063**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILLINGS, EDWARD, JOSEPH, MR.,**

Mailing Address 620 WADE AVE UNIT 502

City  
RALEIGHState  
NCZip Code  
27605-3293FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672745**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLIARD, LARRY, , ,**

Mailing Address 3803 BELHAVEN DR.

City  
GREENSBOROState  
NCZip Code  
27407-4415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

228.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674308**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

215.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2397 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIPP, CHARLES, R., ,**

Mailing Address 4226 ROBERTS RD

City  
KERSHAWState  
SCZip Code  
29067-8761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2025

**Transaction ID : SA11A.27675543**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLINGTON, MARGARET, , ,**

Mailing Address 9960 ATRIUM WAY APT 514

City  
JACKSONVILLEState  
FLZip Code  
32225-6447FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2025

**Transaction ID : SA11A.27675870**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLLSTEIN, CAROLYN, , ,**

Mailing Address 11691 S RIDGEVIEW RD. APT. 303

City  
OLATHEState  
KSZip Code  
66061-6679FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2025

**Transaction ID : SA11A.27674193**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.45

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2398 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLTON, RICHARD, C., ,**

Mailing Address 4 SUNNINGDALE DRIVE

City  
SAINT LOUISState  
MOZip Code  
63124-1665FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.92

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673614**

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOUSE, ANTHONY, , ,**

Mailing Address 1691 NORTH 2100 EAST ROAD

City  
STONINGTONState  
ILZip Code  
62567-5346FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674344**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOUSE, ANTHONY, , ,**

Mailing Address 1691 NORTH 2100 EAST ROAD

City  
STONINGTONState  
ILZip Code  
62567-5346FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674354**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

132.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2399 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOUSE, ANTHONY, , ,**

Mailing Address 1691 NORTH 2100 EAST ROAD

City  
STONINGTONState  
ILZip Code  
62567-5346FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674367**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOWARD, VICTOR, , ,**

Mailing Address 616 BRIDGEMAN LN

City  
ROMEOVILLEState  
ILZip Code  
60446-5195FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673628**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

734.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672816**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2400 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.49

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672828**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.49

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672847**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUGHES, MARY ANNE, , ,**

Mailing Address 35803 CORNELL DR

City  
YUCAIPAState  
CAZip Code  
92399-4047FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

606.16

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674181**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2401 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUGHES, MARY ANNE, , ,**

Mailing Address 35803 CORNELL DR

City  
YUCAIPAState  
CAZip Code  
92399-4047FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675210**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HULICK, THOMAS, , ,**

Mailing Address 790 E. COLORADO BLVD.

City  
PASADENAState  
CAZip Code  
91101-2113FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRATEGY ASSET MANAGERSOccupation (for Individual)  
INVESTMENT ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674516**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HULL, GUY, , ,**

Mailing Address 2521 S. GLENBROOK DR.

City  
GARLANDState  
TXZip Code  
75041-2903FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GUY HULL II J DOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673193**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

257.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2402 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUSTAD, JANET, , ,**

Mailing Address 51806 PELICAN POINT DRIVE

City  
DETROIT LAKESState  
MNZip Code  
56501-9405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

898.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674120**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IVERS, DONALD, , MR.,**

Mailing Address 1511 PAUL SPRING PARKWAY

City  
ALEXANDRIAState  
VAZip Code  
22308-1143FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

723.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672988**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675193**

Amount of Each Receipt this Period

0.19

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2403 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JENNINGS, PAULA, , ,**

Mailing Address 122 QUAIL RUN DR.

City  
WARNER ROBINSState  
GAZip Code  
31088-6504FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.25

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675234**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JEWETT, STEVEN, , ,**

Mailing Address 31896 BIRCHWOOD DRIVE

City  
LAKE ELSINOREState  
CAZip Code  
92532-2628FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673141**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEWETT, STEVEN, , ,**

Mailing Address 31896 BIRCHWOOD DRIVE

City  
LAKE ELSINOREState  
CAZip Code  
92532-2628FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674599**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2404 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEWETT, STEVEN, , ,**

Mailing Address 31896 BIRCHWOOD DRIVE

City  
LAKE ELSINOREState  
CAZip Code  
92532-2628FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674603

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGSState  
IDZip Code  
83276-1671FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674534

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, DORIS, C., MS.,**

Mailing Address 506 BROOKS VILLAGE DR.

City  
PENDERGRASSState  
GAZip Code  
30567-4629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

273.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672563

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.41



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2405 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, DORIS, C., MS.,**

Mailing Address 506 BROOKS VILLAGE DR.

City  
PENDERGRASS

State  
GA

Zip Code  
30567-4629

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.39

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27672569**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, FRANK, , , III**

Mailing Address 457 AVONDALE DR.

City  
BRANSON

State  
MO

Zip Code  
65616-3485

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.80

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27674522**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIX

State  
AZ

Zip Code  
85017-2534

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.29

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27675314**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

66.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2406 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675323

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675341

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675353

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

9.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2407 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, HOWARD, R., MR.,**

Mailing Address 5626 FOREST GLEN DR

City  
GROVE CITYState  
OHZip Code  
43123-9413FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674476**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, JOHN, W., MR.,**

Mailing Address 3927 N FLORENCE BLVD

City  
FLORENCEState  
AZZip Code  
85132-8403FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675206**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674611**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

99.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2408 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JUEL, NORMAN, , ,**

Mailing Address 1620 W 2ND STREET LOT 34

City  
ROCK SPRINGSState  
WYZip Code  
82901-7662FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672805**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAPETANAKIS, GEORGE, J., ,**

Mailing Address 9801TANDEM CT

City  
RALEIGHState  
NCZip Code  
27615-1553FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.09

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674621**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAPETANAKIS, GEORGE, J., ,**

Mailing Address 9801TANDEM CT

City  
RALEIGHState  
NCZip Code  
27615-1553FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.09

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674675**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2409 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAPETANAKIS, GEORGE, J., ,**

Mailing Address 9801TANDEM CT

City  
RALEIGHState  
NCZip Code  
27615-1553FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674848

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEILLOR, JUDITH, , ,**

Mailing Address 3205 BANYAN CIRCLE

City  
HARLINGENState  
TXZip Code  
78550-7404FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675424

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KIELY, PETER, F., MR.,**Mailing Address 8787 BAY COLONY DR.  
APT 302City  
NAPLESState  
FLZip Code  
34108-0781FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

468.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673967

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

244.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2410 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KING, JAMES, , ,**

Mailing Address 6607 WOODLAND CIRCLE

City  
FORT SMITHState  
ARZip Code  
72916-8988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674432**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KING, LISA, , ,**

Mailing Address 628 VISTA VIEW DR.

City  
ASHEVILLEState  
NCZip Code  
28803-8572FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675297**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KIRBY, ERROL, , MR.,**

Mailing Address 2895 TOBIANO DR.

City  
RENOState  
NVZip Code  
89521-8022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

797.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672499**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.17

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2411 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNAPP, FRANKLIN, P., ,**

Mailing Address 10715 PARKGATE DR

City  
NOKESVILLEState  
VAZip Code  
20181-2921FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675257

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNOWLES, KAREN, , ,**

Mailing Address 308 GRAVES DRIVE

City  
FORESTState  
VAZip Code  
24551-2622FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTRA HEALTHOccupation (for Individual)  
SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

794.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675520

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOEKEMOER, PHILIP, , ,**

Mailing Address 545 OCEAN VIEW AVENUE

City  
ENCINITASState  
CAZip Code  
92024-2629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
QUALCOMMOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674500

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

119.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2412 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOHLHOFF, HANSPETER, , MS.,**

Mailing Address 1545 ARBORETUM DRIVE UNIT 129

City  
OSHKOSHState  
WIZip Code  
54901-9300FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.88

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674230**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KORENEK, LAWRENCE, , ,**

Mailing Address 421FRELS

City  
EL CAMPOState  
TXZip Code  
77437-2063FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BANKEROccupation (for Individual)  
LENDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.38

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673972**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KORFF, PHILLIP, , ,**

Mailing Address 3250 FOOP

City  
ROOP ROADState  
CAZip Code  
95020-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

307.50

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673767**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2413 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KORFF, PHILLIP, , ,**

Mailing Address 3250 FOOP

City  
ROOP ROADState  
CAZip Code  
95020-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.50

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675896**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUBINSKI, KENNETH, , ,**

Mailing Address P.O. BOX 60078

City  
RENTONState  
WAZip Code  
98058-3078FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL RISK CONS.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673868**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUBINSKI, KENNETH, , ,**

Mailing Address P.O. BOX 60078

City  
RENTONState  
WAZip Code  
98058-3078FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL RISK CONS.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673871**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2414 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.91

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672617**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.91

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672702**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.91

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673906**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2415 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KUNES, ALMA, G., ,

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675143

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KURTI, S., CAROL, ,

Mailing Address 934 COWEE SCHOOL RD.

City  
FRANKLINState  
NCZip Code  
28734-4524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673129

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAMB, FRANK, , ,

Mailing Address 2346WEST COLLEGE AVE

City  
SANTA ROSAState  
CAZip Code  
95401-4951FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673489

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2416 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAMPING, DOUG, R., MR.,**

Mailing Address 1433 SOUTH 35 EAST

City  
FARMINGTONState  
UTZip Code  
84025-2004FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UDCOccupation (for Individual)  
CO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.10

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673669**

Amount of Each Receipt this Period

20.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANCE, TERESA, , ,**

Mailing Address 2004 SIFIELD GREENS WAY

City  
SUN CITY CENTERState  
FLZip Code  
33573-7168FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.29

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673237**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAVELY, NANCY, , ,**

Mailing Address 5336 POINTE DR.

City  
EAST CHINAState  
MIZip Code  
48054-4166FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

359.65

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675055**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2417 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAYCOCK, JAMES, , ,**

Mailing Address 7628 GANNON AVENUE

City  
UNIVERSITY CITYState  
MOZip Code  
63130-2819FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENTERPRISEOccupation (for Individual)  
PART TIME DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672943

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEAVENS, CAMERON, , ,**

Mailing Address 979 SYIDA DR.

City  
PACIFIC GROVEState  
CAZip Code  
93950-5327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAMERON LEAVENSOccupation (for Individual)  
LAND CARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674139

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEAVENS, CAMERON, , ,**

Mailing Address 979 SYIDA DR.

City  
PACIFIC GROVEState  
CAZip Code  
93950-5327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAMERON LEAVENSOccupation (for Individual)  
LAND CARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

566.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674562

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13.07

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2418 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITY

State  
CA

Zip Code  
94404-3949

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27674696**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEE, RICHARD, T., MR.,**

Mailing Address P.O. BOX 2113

City  
ORLANDO

State  
FL

Zip Code  
32802-2113

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

901.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27674556**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LELEUX, DAVID, , ,**

Mailing Address 3 HEATHERSTONE DR.

City  
LAFAYETTE

State  
LA

Zip Code  
70508-4913

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENGINEER

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

276.25

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27674739**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

96.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2419 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673673**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEONARD, ANNE, , ,**

Mailing Address 13202 HUNTERS SPRING

City  
SAN ANTONIOState  
TXZip Code  
78230-2862FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AHAOccupation (for Individual)  
SMA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.86

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673515**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LERNER, GLENN, , ,**

Mailing Address 445 EL CAMINO DEL MAR

City  
SAN FRANCISCOState  
CAZip Code  
94121-1039FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.27

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675729**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

102.49

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2420 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LERNER, GLENN, , ,

Mailing Address 445 EL CAMINO DEL MAR

City  
SAN FRANCISCOState  
CAZip Code  
94121-1039FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675730

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LERNER, GLENN, , ,

Mailing Address 445 EL CAMINO DEL MAR

City  
SAN FRANCISCOState  
CAZip Code  
94121-1039FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675733

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LERNER, GLENN, , ,

Mailing Address 445 EL CAMINO DEL MAR

City  
SAN FRANCISCOState  
CAZip Code  
94121-1039FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675734

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

80.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2421 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LERNER, GLENN, , ,**

Mailing Address 445 EL CAMINO DEL MAR

City  
SAN FRANCISCOState  
CAZip Code  
94121-1039FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.27

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675735**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LESSY JR, ROY, , ,**

Mailing Address 64 BLACKPOOL RD

City  
REHOBOTH BEACHState  
DEZip Code  
19971-3511FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.36

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674689**

Amount of Each Receipt this Period

2.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LESTER, JIM, H., ,**

Mailing Address 3447 VIA LOMA VISTA

City  
ESCONDIDOState  
CAZip Code  
92029-7724FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

389.01

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674737**

Amount of Each Receipt this Period

15.01

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2422 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEYSHON, DAVID, W., MR.,**

Mailing Address 1608 HONEYSUCKLE CT

City  
WEST CHESTERState  
PAZip Code  
19380-4361FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SHELF STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674519**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEYSHON, DAVID, W., MR.,**

Mailing Address 1608 HONEYSUCKLE CT

City  
WEST CHESTERState  
PAZip Code  
19380-4361FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SHELF STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674846**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

967.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673202**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2423 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674058**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LINDENBERG, LARRY, , MR.,**

Mailing Address 846 DOERFLER DR.

City  
KIMBERLYState  
WIZip Code  
54136-2304FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674234**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINTON, LEONARD, M., MR.,**

Mailing Address 2215 WATERTOWN COURT

City  
THOUSAND OAKSState  
CAZip Code  
91360-1971FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VIASOURCEOccupation (for Individual)  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674847**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2424 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673791

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOHMAN, CAROLYN, , ,**

Mailing Address 3229 WALNUT CREEK CT

City  
BRYANState  
TXZip Code  
77807-4852FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672402

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOHMAN, CAROLYN, , ,**

Mailing Address 3229 WALNUT CREEK CT

City  
BRYANState  
TXZip Code  
77807-4852FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

615.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673246

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2425 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LONG, KAREN, , ,**

Mailing Address 300 GREENBRIAT ST

City  
BELTONState  
TNZip Code  
76613-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672715

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOWRY, DIANE, , ,**

Mailing Address 9 WOODRIDGE RD

City  
MOULTRIEState  
GAZip Code  
31768-5815FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673236

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOWRY, DIANE, , ,**

Mailing Address 9 WOODRIDGE RD

City  
MOULTRIEState  
GAZip Code  
31768-5815FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

307.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673259

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2426 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUDEMAN, ROGER, , ,**

Mailing Address 2291 W PARK AVE

City  
CHANDLERState  
AZZip Code  
85224-4035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673442**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674695**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674700**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

39.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2427 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUTHER, ROBERT, , MR.,**

Mailing Address 2201 LAUREL OAK DRIVE

City  
VALENCIAState  
PAZip Code  
16059-8776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.16

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675155**

Amount of Each Receipt this Period

46.45

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LYLES, RICHARD, A., ,**

Mailing Address 27211. MILLER. STREET

City  
PORT NECHESState  
TXZip Code  
77651-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674802**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACARTHUR, ALEXANDER, D., MR.,**

Mailing Address 321 KNOT WAY

City  
DELANDState  
FLZip Code  
32724-6253FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

206.25

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675417**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.45

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2428 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACDONALD, CARROLL, , ,**

Mailing Address 33575 N DOVE LAKES DR

City  
CAVE CREEKState  
AZZip Code  
85331-4102FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675829**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACKENZIE, SCOTT, , ,**

Mailing Address 296 PLEASANT STREET

City  
PEMBROKEState  
MAZip Code  
02359-2805FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DTM PACKAGING LLCOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674259**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACOMBER, RICHARD, , ,**

Mailing Address 3727 SE 17TH AVENUE

City  
CAPE CORALState  
FLZip Code  
33904-5068FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675778**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

210.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2429 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAHADKAR, MOHAN, , ,**

Mailing Address 4 ARIANA COURT

City  
OYSTER BAYState  
NYZip Code  
11771-3417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672537**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARKANDAYA, MANJUNATH, , ,**

Mailing Address 560 WESTMINSTER CIR

City  
GREENVILLEState  
NCZip Code  
27858-9600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VIDANT MEDICAL CENTEROccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675496**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARSH, ALANA, , ,**

Mailing Address 4275 PANORAMIC VIEW DRIVE

City  
MARYVILLEState  
TNZip Code  
37804-3982FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672909**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

273.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2430 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTINSON, RODNEY, , ,**

Mailing Address 13531 W SKY HAWK DR.

City  
SUN CITY WESTState  
AZZip Code  
85375-5832FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.99

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674557**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673292**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

412.55

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674787**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2431 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.39

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674852**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASTRO, MABEL, , ,**

Mailing Address 4616 PRAIRIE POINT BOULEVARD

City  
KISSIMMEEState  
FLZip Code  
34746-6364FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

889.10

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675078**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATEER, RAYMOND, , ,**

Mailing Address 1278 MATEER RD

City  
KITTANNINGState  
PAZip Code  
16201-8024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

264.08

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675739**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.98

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2432 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MATHEWS, TIMOTHY, , ,

Mailing Address 388 PALOMARES AVENUE

City  
VENTURAState  
CAZip Code  
93003-1737FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673690

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MATHEWS, TIMOTHY, , ,

Mailing Address 388 PALOMARES AVENUE

City  
VENTURAState  
CAZip Code  
93003-1737FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674285

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MATHIS, JUDY, , ,

Mailing Address 3733 VILLA SPRINGS CIRCLE

City  
POWDER SPRINGSState  
GAZip Code  
30127-5061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673056

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

153.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2433 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATTOX, JERRY, , ,**

Mailing Address P.O. BOX 752

City  
GILCHRISTState  
ORZip Code  
97737-0752FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675877

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAXWELL, TAYLOR, H., MR.,**

Mailing Address 9121 SOUTHMONT CV206

City  
FORT MYERSState  
FLZip Code  
33908-6308FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672703

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAZZARI, JUDY, , ,**

Mailing Address 904 ACACIA AVE

City  
HUNTINGTON BEACHState  
CAZip Code  
92648-4006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673345

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.42

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2434 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCALLISTER, IDA, , ,**

Mailing Address 5911 E WOODLAWN DR. APT 114

City  
SPOKANE VALLEYState  
WAZip Code  
99212-0364FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VAOccupation (for Individual)  
PATIENT FINANCIAL SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.89

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674153**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCABE, DANIEL, M., MR.,**

Mailing Address 239 WEST TRAIL

City  
STAMFORDState  
CTZip Code  
06903-2407FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.30

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673383**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.36

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673945**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2435 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673947**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673956**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673963**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2436 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673968

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674016

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCORMICK, KIM, , ,**

Mailing Address 5200 MODICA LOTT ROAD

City  
BOSSIER CITYState  
LAZip Code  
71111-7232FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674132

Amount of Each Receipt this Period

475.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

483.33



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2437 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCDANIEL, RON, , MR.,**

Mailing Address 509 HARDWOOD CIR

City  
ORLANDOState  
FLZip Code  
32828-8290FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.08

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674853**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCDONALD, PATRICK, , ,**

Mailing Address 134N FIRST ST. STE 201

City  
BRIGHTONState  
MIZip Code  
48116-1264FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PATRICK A MCDONALD.Occupation (for Individual)  
ARBITRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674927**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCFARLAND, JO ANN, , ,**

Mailing Address 81708 AVENIDA DE BAILE

City  
INDIOState  
CAZip Code  
92203-4101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

273.45

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672975**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2438 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCREYNOLDS, JANETTE, , ,**

Mailing Address 21097 TANGO RD

City  
SUMMERSState  
ARZip Code  
72769-9672FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674223**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCREYNOLDS, JANETTE, , ,**

Mailing Address 21097 TANGO RD

City  
SUMMERSState  
ARZip Code  
72769-9672FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674233**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCVADON, DIANNA, , ,**

Mailing Address 1800 ADAMS ACRES RD.

City  
SAINT AUGUSTINEState  
FLZip Code  
32084-9300FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675413**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

226.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2439 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MELVILLE, ROBERT, , MR.,**

Mailing Address 6235 HARMON GREEN AVE

City  
GRANDVILLEState  
MIZip Code  
49418-9732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675085**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MERIWETHER, NORMA, C., MS.,**

Mailing Address 28 LOST POND

City  
NELLYSFORDState  
VAZip Code  
22958-8004FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675486**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERTZ, PAUL, , MR.,**

Mailing Address 5 GALE AVE

City  
RIVER FORESTState  
ILZip Code  
60305-2009FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1740.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675584**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2440 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MESSINA, JILL, A., ,**

Mailing Address 1374 MIDLAND AVE APT 215

City  
BRONXVILLEState  
NYZip Code  
10708-6850FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.38

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674019**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. METHENY, WILLIAM, , ,**

Mailing Address P.O. BOX 414

City  
BRIDGERState  
MTZip Code  
59014-0414FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.49

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674319**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. METKOVICH, GEORGE, , MR.,**

Mailing Address 2072 PHALAROPE COURT

City  
COSTA MESAState  
CAZip Code  
92626-4734FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.06

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672894**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2441 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIDDLETON, JAYNE, , ,**

Mailing Address 2420CREEKWOOD DR

City  
BATON ROUGEState  
LAZip Code  
70808-0115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.98

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675470**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILES, DIANNE, E., MRS.,**

Mailing Address 2661 TALLANT RD, C898

City  
SANTA BARBARAState  
CAZip Code  
93105-4839FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.28

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674495**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, ANNE, , ,**

Mailing Address 6 RONNA RD

City  
GLOUCESTERState  
MAZip Code  
01930-1665FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1006.86

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674777**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2442 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673742**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELLState  
NMZip Code  
88201-8659FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674752**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELLState  
NMZip Code  
88201-8659FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674972**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5.11

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2443 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELL

State  
NM

Zip Code  
88201-8659

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.16

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27675014**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MINWALLA, DARAYUS, , ,**

Mailing Address 150 WEST END AVENUE  
9F

City  
NEW YORK

State  
NY

Zip Code  
10023-5713

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27675874**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOFFETT, MARY, , ,**

Mailing Address 2170 HEMPILL DRIVE

City  
JENA

State  
LA

Zip Code  
71342-4242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

410.33

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27672826**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

57.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2444 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONGOVEN, CASS, , ,**

Mailing Address 6 SUNSET VIEW DRIVE

City  
CLANCYState  
MTZip Code  
59634-9215FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675129

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674873

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRIS, GEORGE, S., MR.,**

Mailing Address P.O. BOX 3698

City  
PINETOPState  
AZZip Code  
85935-3698FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

246.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672930

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

110.41



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2445 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORRIS, MIKE , , ,**

Mailing Address 578 SNAPDRAGON WAY

City  
IMPERIALState  
CAZip Code  
92251-8947FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

842.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674356**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MUELLER, VALERIE, , ,**

Mailing Address PO BOX 2863

City  
GULFPORTState  
MSZip Code  
39505-2863FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RPMPIZZAOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675280**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MULLER, DONNA, , MS.,**

Mailing Address 295 JUDD RD

City  
MILANState  
MIZip Code  
48160-9585FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672586**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

226.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2446 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUST, KIM, , ,**

Mailing Address 223 BELVEDERE DRIVR

City  
MACONState  
GAZip Code  
31204-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673665

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NAHALE, REBECCA, A., ,**

Mailing Address 11224 W YUCCA

City  
LITTLETONState  
COZip Code  
80125-9283FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SETPOINT SYSTEMSOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674915

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEWMAN, MARILYN, K., MRS.,**

Mailing Address P.O. BOX 282

City  
FORGANState  
OKZip Code  
73938-0282FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673772

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

312.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2447 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NGUYEN, NGAI, X., DR.,**Mailing Address 696 EAST SANTA CLARA STREET  
108City  
SAN JOSEState  
CAZip Code  
95112-1911FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1564.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674228**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIELSEN, EARL, , ,**

Mailing Address 10 LIDGERWOOD PLACE

City  
MORRISTOWNState  
NJZip Code  
07960-5736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MORRISTOWN MEDICAL CENTEROccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675117**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NOBLE, CRISTINA, HEEREN, ,**

Mailing Address 1200 FIFTH AVENUE

City  
NEW YORKState  
NYZip Code  
10029-5208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1168.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673937**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2448 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUCKOLS, GAIL, , MS.,**

Mailing Address 13144 RD.216

City  
PORTERVILLEState  
CAZip Code  
93257-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GAIL NUCKOLSOccupation (for Individual)  
CATER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.38

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672961**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

589.96

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674168**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUTTER, ROBERT, , ,**

Mailing Address 1358 WHITE BARN TRL

City  
XENIAState  
OHZip Code  
45385-7589FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.50

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674685**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

224.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2449 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ODOM, TAMELA, , ,**

Mailing Address 403 SANFORD ROAD

City  
ANDALUSIAState  
ALZip Code  
36420-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.98

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672489**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, PATRICIA, , ,**

Mailing Address 243 OCEANO DRIVE

City  
LOS ANGELESState  
CAZip Code  
90049-4123FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.61

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672704**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSBURN, ROBERT, , ,**

Mailing Address 12735 SHADOW CREEK PARKWAY

City  
PEARLANDState  
TXZip Code  
77584-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

625.25

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675876**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2450 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OWEN, JAMES, , ,**

Mailing Address 254 MEYERMAN RD

City  
OWEGOState  
NYZip Code  
13827-6744FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VERIZONOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675310

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OWEN, WILLIAM, E., MR.,**

Mailing Address 481 S KEELER WOODS DR NW

City  
MARIETTAState  
GAZip Code  
30064-2027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674826

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAGANINI, KAREN, , MS.,**

Mailing Address 8863 ROBIN LN

City  
KIRTLANDState  
OHZip Code  
44094-9768FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
K&DOccupation (for Individual)  
PROPERTY MANAGEMENT & DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674140

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2451 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAGE, CHERYL, L., MS.,**

Mailing Address 13 PIPESTONE DR.

City  
MIAMISBURGState  
OHZip Code  
45342-6603FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MIAMI VALLEY HOSPITALOccupation (for Individual)  
NURSE/RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675756**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAINTER, GLORIA, , ,**

Mailing Address 2516 BARBADOS DRIVE

City  
GAUTIERState  
MSZip Code  
39553-6762FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674748**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PALAZA, MADELEINE, , ,**

Mailing Address 69 KING ST.

City  
STOUGHTONState  
MAZip Code  
02072-3820FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

599.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675211**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2452 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALERMO, MARK, , ,**

Mailing Address 246 GARFIELD PL

City  
BROOKLYNState  
NYZip Code  
11215-2207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER, INVESTOR, CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673368**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PALMER, JEAN, B., MRS.,**

Mailing Address 224 ARNOLD AVE

City  
SYRACUSEState  
NYZip Code  
13210-3714FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672967**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PALMER, LORETTA, , ,**

Mailing Address 1215 ANCHORS WAY DR. SPCE 140

City  
VENTURAState  
CAZip Code  
93001-0277FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

357.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672955**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2453 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALMER, LORETTA, , ,**

Mailing Address 1215 ANCHORS WAY DR. SPCE 140

City  
VENTURAState  
CAZip Code  
93001-0277FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672963

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PALMER, LORETTA, , ,**

Mailing Address 1215 ANCHORS WAY DR. SPCE 140

City  
VENTURAState  
CAZip Code  
93001-0277FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672969

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PANDINA, ANTHONY, , ,**

Mailing Address 20413 NE 161ST ST

City  
BRUSH PRAIRIEState  
WAZip Code  
98606-6707FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

296.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674043

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2454 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PANG, JENNIE, A., ,**

Mailing Address 1428 ALEWA DR.

City  
HONOLULUState  
HIZip Code  
96817-1203FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672834**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARKER, ROBERT, , ,**

Mailing Address 6495 FARM TO MARKET RD

City  
WHITEFISHState  
MTZip Code  
59937-8392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
GM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674303**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKS, JENNIE, , ,**

Mailing Address 386 W TROXELL RD

City  
OAK HARBORState  
WAZip Code  
98277-7909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

521.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673825**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2455 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PATTERSON, BARBARA, , ,**

Mailing Address 2700 SUNRUNNER LANE

City  
GULF BREEZEState  
FLZip Code  
32563-2562FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673363**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PELLETIER, JOHN, , ,**

Mailing Address 199 MAIN STREET

City  
VAN BURENState  
MEZip Code  
04785-1256FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UMFKOccupation (for Individual)  
ADJUNCT PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675722**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PELTIER, LARRY, , MR.,**

Mailing Address 2432 E ALDEN ST

City  
SIMI VALLEYState  
CAZip Code  
93065-2308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672906**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2456 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORGState  
VAZip Code  
23860-8229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672858**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675217**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675223**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2457 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675230**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675235**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672613**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.65

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2458 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PLACA, ALAN, , ,

Mailing Address 200 EAGLETON ESTATE BLVD

City  
PALM BEACH GARDENSState  
FLZip Code  
33418-8411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GIULIANI PARTNERS LLCOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675330

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POHLE, CORTLAND, , ,

Mailing Address 614 TATTLESBURY DR

City  
CONWAYState  
SCZip Code  
29526-2652FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672922

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PORTER, PEGGY, , ,

Mailing Address P.O. BOX 245

City  
VINAState  
CAZip Code  
96092-0245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674097

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

135.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2459 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POTEET, MARY, , ,**Mailing Address 3636 GREENACRES PLACE DR.  
APT 43City  
BOSSIER CITYState  
LAZip Code  
71111-2147FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674118**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRATT, BRENDA, , ,**

Mailing Address 2312 HICKORY RIDGE DRIVE

City  
BOSSIER CITYState  
LAZip Code  
71111-5513FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674229**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PREMO, TERRY, , ,**

Mailing Address 1409 EVERGREEN PARK DR. SW - 301

City  
OLYMPIAState  
WAZip Code  
98502-5827FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673316**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2460 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRESLEY, JUANITA, , MS.,**

Mailing Address 4115 E. CLOCKTOWER LANE, APT. 246

City  
MERIDIANState  
IDZip Code  
83642-4742FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673949**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRESLEY, JUANITA, , MS.,**

Mailing Address 4115 E. CLOCKTOWER LANE, APT. 246

City  
MERIDIANState  
IDZip Code  
83642-4742FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674340**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PYLES, RICHARD, , ,**

Mailing Address 5402 DUTTON AVE

City  
NORTH CHARLESTONState  
SCZip Code  
29406-3761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TANK INDUSTRY CONSULTANTSOccupation (for Individual)  
TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674147**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.61



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2461 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAMEY, KEN, , ,**

Mailing Address 998 COUNTY ROAD 76

City  
ALTURASState  
CAZip Code  
96101-7777FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672801

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RANDALL, RICHARD, L., MR.,**

Mailing Address 9888 WHISTLING ELK DR

City  
LITTLETONState  
COZip Code  
80127-6107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.51

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674643

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RANSOM, JAMES, H., DR.,**

Mailing Address 319 WOODLAND RD.

City  
SEWICKLEYState  
PAZip Code  
15143-1048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675712

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

607.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2462 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REEDY, MARY, A., MS.,**

Mailing Address 213 WOODSIDE DR

City  
CHILHOWIEState  
VAZip Code  
24319-5896FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.99

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675510**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REINHARD, ROSEMARIE, , MR.,**

Mailing Address 2755 FALCON STREET

City  
EAST MEADOWState  
NYZip Code  
11554-4318FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.15

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673322**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REINHARD, ROSEMARIE, , MR.,**

Mailing Address 2755 FALCON STREET

City  
EAST MEADOWState  
NYZip Code  
11554-4318FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

505.15

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673545**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2463 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REISS, CLAIRE, K., MRS.,**Mailing Address 464 PROSPECT STREET  
UNIT 501City  
LA JOLLAState  
CAZip Code  
92037-4742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1431.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673198

Amount of Each Receipt this Period

18.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REIZOVIC, ROY, , ,**

Mailing Address 8520 SUTTERFIELD DRIVE

City

COLORADO SPRINGS

State

CO

Zip Code

80920-6204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674970

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REIZOVIC, ROY, , ,**

Mailing Address 8520 SUTTERFIELD DRIVE

City

COLORADO SPRINGS

State

CO

Zip Code

80920-6204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674975

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2464 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REIZOVIC, ROY, , ,**

Mailing Address 8520 SUTTERFIELD DRIVE

City  
COLORADO SPRINGSState  
COZip Code  
80920-6204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674986**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REIZOVIC, ROY, , ,**

Mailing Address 8520 SUTTERFIELD DRIVE

City  
COLORADO SPRINGSState  
COZip Code  
80920-6204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675007**

Amount of Each Receipt this Period

20.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RENNHACK, SHARON, , ,**

Mailing Address 1700 NW 74 AVENUE

City  
PLANTATIONState  
FLZip Code  
33313-4404FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675483**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2465 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIBA, BRADLEY, A., MR.,**

Mailing Address 513 4TH AVE. NE

City  
SARTELLState  
MNZip Code  
56377-2123FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.82

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673162**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RICCIUTI, LOU RAE, , ,**

Mailing Address 12107 KAMMERER AVENUE

City  
CONNEAUT LAKEState  
PAZip Code  
16316-3941FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.98

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672873**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674489**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.45

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2466 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675086**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675088**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIGGS, RUSSELL, , ,**

Mailing Address P.O. BOX 493

City  
SEDALIAState  
COZip Code  
80135-0493FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DOUBLE R EXCAVATINGOccupation (for Individual)  
HEAVY EQUIPMENT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

258.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675125**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2467 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672815

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, DALE, , ,**

Mailing Address 104 BRANNON LANE

City  
TROYState  
ALZip Code  
36079-8203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674996

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODER, PAUL, W., ,**

Mailing Address 18 QUEEN COURT

City  
RED BANKState  
NJZip Code  
07701-5207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PERSPECTA LABSOccupation (for Individual)  
SYSTEMS ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674869

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

114.99

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2468 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGO

State  
CA

Zip Code  
92130-2456

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

02 / 11 / 2025

**Transaction ID : SA11A.27675803**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGO

State  
CA

Zip Code  
92130-2456

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

02 / 11 / 2025

**Transaction ID : SA11A.27675808**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGO

State  
CA

Zip Code  
92130-2456

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.78

Date of Receipt

02 / 11 / 2025

**Transaction ID : SA11A.27675811**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2.94



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2469 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675843**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROSSER, MELISSA, , ,**

Mailing Address 8802 W. GLENROSA AVE.

City  
PHOENIXState  
AZZip Code  
85037-1717FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674183**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROWE, GARRY, , ,**

Mailing Address 6650 EVENING ST

City  
COLUMBUSState  
OHZip Code  
43085-2487FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

759.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674486**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2470 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672445**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675196**

Amount of Each Receipt this Period

1.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675291**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

4.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2471 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675366

Amount of Each Receipt this Period

1.56

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVERState  
NJZip Code  
08882-1908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674031

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673778

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2472 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674582**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RYBERG, JANICE, , MS.,**

Mailing Address 480 E CLARK AVE

City

SANTA MARIA

State

CA

Zip Code

93455-4835

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672939**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAGALE, MOEIFAGA, , ,**

Mailing Address 7356 TOOMA STREET

City

SAN DIEGO

State

CA

Zip Code

92139-2939

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674386**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.84

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2473 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAGALE, MOEIFAGA, , ,**

Mailing Address 7356 TOOMA STREET

City  
SAN DIEGOState  
CAZip Code  
92139-2939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.89

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674388**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAGALE, MOEIFAGA, , ,**

Mailing Address 7356 TOOMA STREET

City  
SAN DIEGOState  
CAZip Code  
92139-2939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.89

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674674**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SALAT, ERIC, , ,**Mailing Address 14 HORATIO STREET  
5DCity  
NEW YORKState  
NYZip Code  
10014-1666FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.40

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675329**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2474 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANCHEZ, ROBERTO, , ,**

Mailing Address 6709 WASHINGTON #430

City  
WHITTIERState  
CAZip Code  
90608-7122FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674712**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672530**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674938**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

153.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2475 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674951**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674962**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674982**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

178.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2476 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SARTI, ED, , ,**

Mailing Address 2 OVERLOOK COURT

City  
NORTH CALDWELLState  
NJZip Code  
07006-4590FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675663**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHLOUGH, JAMES, , ,**

Mailing Address 3810 CHURCH HILL

City  
CRYSTAL LAKEState  
ILZip Code  
60014-6511FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673995**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHOEN, JONATHAN, , ,**

Mailing Address 10618 W. PICO BLVD,

City  
LOS ANGELESState  
CAZip Code  
90064-2214FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672471**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

800.25



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2477 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHROCK, WILLIAM, , MR.,**

Mailing Address 1353 HWY 93 N

City  
VICTORState  
MTZip Code  
59875-9769FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SCHROCK CONSTRUCTION INCOccupation (for Individual)  
BUILDING CONSTRUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675859**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHULTZ, DONNA, I., MS.,**

Mailing Address 4801 ZINFANDEL LN

City  
BAKERSFIELDState  
CAZip Code  
93306-1859FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673372**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHUMAN, JAMES, , ,**

Mailing Address 106 POGUE AVE

City  
EASTLANDState  
TXZip Code  
76448-3005FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
J & J AIR CONDITIONINGOccupation (for Individual)  
A/C SALES & SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673832**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

239.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2478 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHWARTZ, JAMES, F., MR.,**

Mailing Address 60455 DESERT SHADOW DRIVE

City  
LA QUINTAState  
CAZip Code  
92253-7726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.98

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672389**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674024**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674025**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2479 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCOTT, AUDREY, , ,

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674028

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCOTT, AUDREY, , ,

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674030

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCOTT, AUDREY, , ,

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674032

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2480 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674035

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674041

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, JOHN, , ,**

Mailing Address 8012 FIELDSTONE AVENUE NW

City  
ALBUQUERQUEState  
NMZip Code  
87120-8030FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673511

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2481 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEGURA, LULA, , ,**

Mailing Address 1001 BROADMOOR BLVD

City  
LAFAYETTEState  
LAZip Code  
70503-5005FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675853

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEIFERT, WILLIAM, , , JR.**

Mailing Address 345 LONG MEADOW DR

City  
FREDERICKSBURGState  
VAZip Code  
22406-4977FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CSRAOccupation (for Individual)  
MASTER INTEL ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674798

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEIFERT, WILLIAM, , , JR.**

Mailing Address 345 LONG MEADOW DR

City  
FREDERICKSBURGState  
VAZip Code  
22406-4977FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CSRAOccupation (for Individual)  
MASTER INTEL ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674809

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

174.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2482 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEPULVADO, WILNA, , MS.,**

Mailing Address 8709 GLENMORA DRIVE

City  
SHREVEPORTState  
LAZip Code  
71106-6234FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.95

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675208**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHACKLEFORD, RUSTY, , ,**

Mailing Address 3301 BRITTANY LN

City  
MOBILEState  
ALZip Code  
36675-0001FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GOVTOccupation (for Individual)  
PM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675415**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHARPE, LELA, , ,**

Mailing Address 21596 COUNTY ROAD 3749

City  
CLEVELANDState  
TXZip Code  
77327-5758FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CITYOccupation (for Individual)  
FIRST RESPONDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.65

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673568**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

248.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2483 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHAW, DAVID, L., DR.,**

Mailing Address 225 COLEWOOD WAY

City  
ATLANTAState  
GAZip Code  
30328-2922FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2025

**Transaction ID : SA11A.27672555**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHAYS, LORRAINE, , ,**

Mailing Address 14659 CANALVIEW DRIVE APT A

City  
DELRAY BEACHState  
FLZip Code  
33484-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.21

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2025

**Transaction ID : SA11A.27672509**

Amount of Each Receipt this Period

1.71

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHEDLOCK, JOHN, , ,**

Mailing Address 10089 IRON MOUNTAIN CT

City  
RANCHO CUCAMONGAState  
CAZip Code  
91737-6831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2025

**Transaction ID : SA11A.27672686**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.85

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2484 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHEDLOCK, JOHN, , ,

Mailing Address 10089 IRON MOUNTAIN CT

City  
RANCHO CUCAMONGAState  
CAZip Code  
91737-6831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672771

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHIELDS, GALEN, , ,

Mailing Address 1530 SUNFLOWER DR.

City  
MCPHERSONState  
KSZip Code  
67460-2207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE FARMOccupation (for Individual)  
INS AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672620

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHOCKLEY, SANDRA, , ,

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673861

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

46.04



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2485 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673863

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673864

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675567

Amount of Each Receipt this Period

3.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

33.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2486 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHORE, LYNN, J., MRS.,**

Mailing Address P.O. BOX 6144

City  
BATTLEMENT MESAState  
COZip Code  
81636-6144FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SADDLEBACK STORAGEOccupation (for Individual)  
MANAGER STORAGE FACILITY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674509**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHUGER, JILL, , ,**

Mailing Address N7756 BUSHEY RD

City  
TREGOState  
WIZip Code  
54888-9327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674499**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SICOLA, CHARLES, , ,**

Mailing Address 5532 JENNIE ST

City  
ZEPHYRHILLSState  
FLZip Code  
33542-6829FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FRANCHISE CONSULTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

547.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675748**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2487 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672413**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672415**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672417**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

165.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2488 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672419**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672423**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672424**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2489 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SILVA, LISA, , ,

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672425

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SILVA, LISA, , ,

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672426

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SILVA, LISA, , ,

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672429

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

244.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2490 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** SILVA, LISA, , ,

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673180

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** SILVA, LISA, , ,

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673183

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** SILVA, LISA, , ,

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673184

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

165.33

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2491 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02		11		2025

**Transaction ID : SA11A.27673190**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02		11		2025

**Transaction ID : SA11A.27673191**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02		11		2025

**Transaction ID : SA11A.27673194**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2492 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673196

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673199

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673200

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.93



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2493 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEK

State  
TX

Zip Code  
78063-6679

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27673203**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEK

State  
TX

Zip Code  
78063-6679

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27673204**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEK

State  
TX

Zip Code  
78063-6679

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27673211**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

260.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2494 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIMONIAN, VIC, S., MR.,**

Mailing Address 6 BURNING TREE

City  
LAGUNA NIGUELState  
CAZip Code  
92677-5305FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674109

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIWIK, DEBORAH, , ,**

Mailing Address 1750 5TH STREET DR. NW

City  
HICKORYState  
NCZip Code  
28601-5206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672848

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLOTTERBECK, SCOTT, F., MR.,**

Mailing Address 9034 RAWHIDE WAY

City  
SACRAMENTOState  
CAZip Code  
95826-2113FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SOUND MIXER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675030

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2495 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, DANIEL, G., MR.,**Mailing Address 7 WOODBINE RD  
APT 100City  
FLORHAM PARKState  
NJZip Code  
07932-2649FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674747**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, LINDA, NESTOR, ,**Mailing Address 700 PENN CENTER BLVD APT 403  
LAUREL VILLAGE APTSCity  
PITTSBURGHState  
PAZip Code  
15235-5916FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675500**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, MARY, L., ,**

Mailing Address 2939 QUENLEY ST

City  
SAINT CHARLESState  
MOZip Code  
63301-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

324.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672459**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

137.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2496 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, MIKE, , ,**

Mailing Address 3 WEST VALE LANE

City  
PADUCAHState  
KYZip Code  
42001-6725FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675019

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, SHERMAN, L., MR.,**

Mailing Address 15011 SWEAT LOOP RD

City  
WIMAUMAState  
FLZip Code  
33598-5007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672879

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672808

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.16

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2497 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SNEARLY, MARTHA, D., MS.,

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672676

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SOBIESKI, JAMES, , MR.,

Mailing Address P.O. BOX 4057

City  
JACKSONState  
WYZip Code  
83001-4057FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672510

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SOOKRADGE, HELEN, , ,

Mailing Address 231 LAKEVIEW DR

City  
MICHIGAN CITYState  
INZip Code  
46360-0802FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEACON HEALTH SYSTEMOccupation (for Individual)  
R.N.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675737

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

258.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2498 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SORTMAN, DONNA, , ,**

Mailing Address 121 DOGWOOD LANE

City  
WILLIAMSPORTState  
PAZip Code  
17701-8828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.28

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672874**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPEIGHT, CAROL, E., ,**

Mailing Address 1421 HWY 641 SOUTH

City  
PARISState  
TNZip Code  
38242-6750FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.20

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674458**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STACHOWSKI, JOHN, , ,**

Mailing Address 3300 NORT KEY DR 9W

City  
NORTH FORT MYERSState  
FLZip Code  
33903-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674678**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

191.15

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2499 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUND

State  
GA

Zip Code  
30107-2716

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27672918**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUND

State  
GA

Zip Code  
30107-2716

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27673010**

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEINER, VALERIE, , ,**

Mailing Address 1505 FOREST PARK AVE

City  
VALPARAISO

State  
IN

Zip Code  
46385-3361

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.30

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025

**Transaction ID : SA11A.27672689**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

51.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2500 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEPHENS, LOUIS, C., ,**Mailing Address 1194 QUEENS RD  
CHARLOTTE NC 28209City  
CHARLOTTEState  
NCZip Code  
28207-1850FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JONES LANG LASALLEOccupation (for Individual)  
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673440**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, , ,**

Mailing Address 1817 WESTGATE PKWY

City  
ATLANTAState  
GAZip Code  
30336-2851FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FLY & FORMOccupation (for Individual)  
PROJECT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674211**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENSON, SCOTT, , ,**

Mailing Address 8924 GUNNISON DRIVE

City  
DALLASState  
TXZip Code  
75231-4812FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674738**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

308.20



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2501 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STOKES, PATSY, , ,**

Mailing Address 2092 GREY FOX LANE

City  
VIRGINIA BEACHState  
VAZip Code  
23456-5206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675265

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOUT, GREGORY, , ,**

Mailing Address 1747 TOMMY AARON DR

City  
EL PASOState  
TXZip Code  
79936-4621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674080

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOUT, GREGORY, , ,**

Mailing Address 1747 TOMMY AARON DR

City  
EL PASOState  
TXZip Code  
79936-4621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

392.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674088

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

76.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2502 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRONG, PAULETTE, , ,**

Mailing Address 15 MEADOW RUE PLACE

City  
BALLSTON SPAState  
NYZip Code  
12020-4309FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672752**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STUART, RICHARD, , ,**

Mailing Address 4611BEE CAVES RD

City  
AUSTINState  
TXZip Code  
78746-5220FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STUART HOME CORPOccupation (for Individual)  
GENERAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674857**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUDOL, JEAN, , ,**

Mailing Address 2640 GATELY DRIVE WEST

City  
WEST PALM BEACHState  
FLZip Code  
33415-7996FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.79

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673727**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

209.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2503 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SWANSON, DANIEL, , ,**

Mailing Address 1725 PAW PAW RD.

City  
STONEVILLEState  
NCZip Code  
27048-8217FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675376**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TANNER, CHARLES, , ,**

Mailing Address 4 WOODVALE ROAD

City  
GLEN ROCKState  
NJZip Code  
07452-3612FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674195**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TARR, ANNE, , ,**

Mailing Address 13306 SOUTHWALK

City  
SAN ANTONIOState  
TXZip Code  
78232-4843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

987.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674701**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

377.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2504 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TARR, ANNE, , ,**

Mailing Address 13306 SOUTHWALK

City  
SAN ANTONIOState  
TXZip Code  
78232-4843FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

987.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675566

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, TOM, , MR.,**

Mailing Address 34835 SE LUSTED RD

City  
GRESHAMState  
ORZip Code  
97080-8950FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TAYLOR BOILEROccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673887

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, TOM, , MR.,**

Mailing Address 34835 SE LUSTED RD

City  
GRESHAMState  
ORZip Code  
97080-8950FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TAYLOR BOILEROccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673892

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2505 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, TOM, , MR.,**

Mailing Address 34835 SE LUSTED RD

City  
GRESHAM

State  
OR

Zip Code  
97080-8950

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
TAYLOR BOILER

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.33

Date of Receipt

**02** / **11** / **2025**

**Transaction ID : SA11A.27673896**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, TOM, , MR.,**

Mailing Address 34835 SE LUSTED RD

City  
GRESHAM

State  
OR

Zip Code  
97080-8950

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
TAYLOR BOILER

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.33

Date of Receipt

**02** / **11** / **2025**

**Transaction ID : SA11A.27673899**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, TOM, , MR.,**

Mailing Address 34835 SE LUSTED RD

City  
GRESHAM

State  
OR

Zip Code  
97080-8950

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
TAYLOR BOILER

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.33

Date of Receipt

**02** / **11** / **2025**

**Transaction ID : SA11A.27673905**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

54.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2506 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, TOM, , MR.,**

Mailing Address 34835 SE LUSTED RD

City  
GRESHAMState  
ORZip Code  
97080-8950FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TAYLOR BOILEROccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673907

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, TOM, , MR.,**

Mailing Address 34835 SE LUSTED RD

City  
GRESHAMState  
ORZip Code  
97080-8950FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TAYLOR BOILEROccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673909

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, TOM, , MR.,**

Mailing Address 34835 SE LUSTED RD

City  
GRESHAMState  
ORZip Code  
97080-8950FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TAYLOR BOILEROccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673917

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2507 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMAS, LAUREL, , ,**

Mailing Address 1450FM3006

City  
PLEASANTONState  
TXZip Code  
78064-6748FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.04

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673472**

Amount of Each Receipt this Period

10.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANEState  
UTZip Code  
84737-1405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.62

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675213**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANEState  
UTZip Code  
84737-1405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

815.62

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675216**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2508 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANEState  
UTZip Code  
84737-1405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675221**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, CRYSTAL, , ,**

Mailing Address 297 N 2780 W

City  
HURRICANEState  
UTZip Code  
84737-1405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675228**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMSON, PAUL, , MR.,**

Mailing Address 606 CANDLEWOOD DRIVE

City  
CANON CITYState  
COZip Code  
81212-2033FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673773**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.34



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2509 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THORPE, DEAN, , ,**

Mailing Address PO BOX 1528

City  
GOLDTHWAITEState  
TXZip Code  
76844-1528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673629**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TINKER, WILLIAM, F., MR., JR.**

Mailing Address P.O. BOX 328

2424 COLUMBUS AVE

City  
SPRINGFIELDState  
OHZip Code  
45501-0328FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TINKEROME60COMOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672995**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TITUS, ALDONA, , ,**

Mailing Address 7214 WEST CROSS CREEK TRAIL

City  
BRECKSVILLEState  
OHZip Code  
44141-3143FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

552.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672869**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

157.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2510 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TITUS, ALDONA, , ,**

Mailing Address 7214 WEST CROSS CREEK TRAIL

City  
BRECKSVILLEState  
OHZip Code  
44141-3143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672872**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TOTTLE, ALAN, , ,**

Mailing Address 1980 COLDWATER LANE

City  
LINCOLNState  
CAZip Code  
95648-8673FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674597**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675344**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2511 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675346

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675348

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675349

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2512 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675350

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675351

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675352

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2513 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675356

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675363

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TROYER, DENNIS, , ,**

Mailing Address 2192 GLEN COVE WAY

City  
HIGH POINTState  
NCZip Code  
27265-9445FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

377.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674075

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2514 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRUCHAN, JORDAN, , ,**

Mailing Address 24 DOCKSIDE LANE #432

City  
KEY LARGOState  
FLZip Code  
33037-5267FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675214**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TUCKER, BRYAN, , MR.,**

Mailing Address P.O. BOX 84519

City  
PEARLANDState  
TXZip Code  
77584-0011FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ONLINE DIRECTIONALOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674369**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675398**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2515 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675411

Amount of Each Receipt this Period

7.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27675590

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TYPER, DONALD, R., MR.,**

Mailing Address 410 N WEAVER ST

City  
HESSTONState  
KSZip Code  
67062-9041FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLC REALESTATE SERVICESOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

335.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27674241

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

72.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2516 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ULZHEIMER, BOB, , ,**

Mailing Address 4011 GUNNIN ROAD

City  
NORCROSSState  
GAZip Code  
30092-1949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.93

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675586**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. UMBARGER, BRENDA, L., ,**

Mailing Address P.O. BOX 1774

City  
FRITCHState  
TXZip Code  
79036-1774FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.56

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673999**

Amount of Each Receipt this Period

29.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. UNRUH, AUDREY, , MS.,**

Mailing Address 1557 BASIL LEAF ST.

City  
MANTECAState  
CAZip Code  
95336-8393FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.30

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675361**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.19



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2517 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. URREIZTIETA, IREL, , ,**

Mailing Address 180 KODIAK ST

City  
MORRO BAYState  
CAZip Code  
93442-3016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672592

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. URREIZTIETA, IREL, , ,**

Mailing Address 180 KODIAK ST

City  
MORRO BAYState  
CAZip Code  
93442-3016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672763

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. URREIZTIETA, IREL, , ,**

Mailing Address 180 KODIAK ST

City  
MORRO BAYState  
CAZip Code  
93442-3016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

477.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672781

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2518 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. URREIZTIETA, IREL, , ,**

Mailing Address 180 KODIAK ST

City  
MORRO BAYState  
CAZip Code  
93442-3016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.55

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673148**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VALENTI, DOMINICK, , ,**

Mailing Address 1105 OAK PARK DR.

City  
ANGLETONState  
TXZip Code  
77515-7869FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675606**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VATTHAUER, VIRGENE, A., MRS.,**

Mailing Address 1321STRATFORD COURT

City  
MIDDLETONState  
WIZip Code  
53562-3675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.65

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673826**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2519 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VEKEMAN, DENIS, , ,**

Mailing Address 38 CAPE COD COURT

City  
WASHINGTON TOWNSHIState  
NJZip Code  
08012-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675699**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VERELL, ELLEN, L., MS.,**

Mailing Address 2127 18TH RD

City  
MEADEState  
KSZip Code  
67864-9403FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674682**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VICKERS, OWEN, , ,**

Mailing Address P.O. BOX 1596

City  
BIRMINGHAMState  
ALZip Code  
35201-1596FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BHT RESOURCESOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674551**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

295.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2520 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672972**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672992**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WADDELL, JENETTA, , ,**

Mailing Address PO BOX 215

City  
TUSCUMBIAState  
ALZip Code  
35674-0215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BLUE MOUNTAIN CHRISTIAN UNIVERSITYOccupation (for Individual)  
DEAN, SCHOOL OF EDUCATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

643.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675057**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2521 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WAGNER, SYLVIA, , ,**

Mailing Address 100 MORGAN TRAIL

City  
LIVINGSTONState  
MTZip Code  
59047-8755FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.16

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674083**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALCOTT, ROGER, B., , JR.**

Mailing Address 2820 GREENBRIAR BLVD

City  
WEST PALM BEACHState  
FLZip Code  
33414-7156FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27675545**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALSH, ARLIE, J., ,**

Mailing Address RR 1 BOX 366

City  
CLARKSBURGState  
WVZip Code  
26301-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

246.70

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672463**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1060.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2522 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALSH, ARLIE, J., ,

Mailing Address RR 1 BOX 366

City  
CLARKSBURGState  
WVZip Code  
26301-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672467

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALSH, ARLIE, J., ,

Mailing Address RR 1 BOX 366

City  
CLARKSBURGState  
WVZip Code  
26301-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27672468

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALSH, JEANNE, , ,

Mailing Address 141 BIRKETT STREET

City  
CARBONDALEState  
PAZip Code  
18407-1618FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

638.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA11A.27673404

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

166.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2523 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673312**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEATHERMAN, GLENNA, F., ,**

Mailing Address 853 S NEWHAVEN DR.

City  
ORANGEState  
CAZip Code  
92869-5443FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.95

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27674549**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEBB, ROSS, A., MR.,**

Mailing Address 6312 N LE MAI AVE.

City  
CHICAGOState  
ILZip Code  
60646-4828FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

822.20

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672462**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2524 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEBB, ROSS, A., MR.,**

Mailing Address 6312 N LE MAI AVE.

City  
CHICAGOState  
ILZip Code  
60646-4828FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673952**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEIGAND, CRAIG, , MR.,**

Mailing Address 2289 S ISABELL ST

City  
LAKEWOODState  
COZip Code  
80228-6460FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674033**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELCH, GARY, , ,**

Mailing Address 3349 AN COUNTY RD 463

City  
MONTALBAState  
TXZip Code  
75853-2933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

331.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672564**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.57



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2525 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELCH, GARY, , ,**

Mailing Address 3349 AN COUNTY RD 463

City  
MONTALBAState  
TXZip Code  
75853-2933FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672714**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTFALL, SHAUN, , ,**

Mailing Address 1870 LAUREL RD

City  
WINTER PARKState  
FLZip Code  
32789-5843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NORTH POINT ADVISORSOccupation (for Individual)  
FINANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674632**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITE, DAN, R., MR., JR.**

Mailing Address 818 TENTH STREET

City  
GAFFNEYState  
SCZip Code  
29340-2681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27672849**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

300.25

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2526 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITE, JAMES, , ,**

Mailing Address 1247 CHEE LANE

City  
TALLAHASSEEState  
FLZip Code  
32304-1662FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PUBLIXOccupation (for Individual)  
FRONT- END CLARK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674249**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITE, PATRICIA, J., ,**

Mailing Address 23295 HARBOR LIGHT CIRCLE

City  
ABINGDONState  
VAZip Code  
24211-5515FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673182**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITE, SHARON, A., MRS.,**

Mailing Address 1235 NORFOLK WAY

City  
SACRAMENTOState  
CAZip Code  
95831-1827FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TWIN RIVERS UNIFIED SCHOOL DISTRICTOccupation (for Individual)  
RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675281**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2527 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WICKER, DUANE, , MR.,**

Mailing Address 4447 LAVENDER LN

City  
PAHRUMPState  
NVZip Code  
89061-0135FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.80

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673117**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, ANGELA, , ,**

Mailing Address 1545 NORTH OCEAN WAY

City  
PALM BEACHState  
FLZip Code  
33480-3050FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.28

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672883**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMS, CAROL, W., ,**

Mailing Address 112 LAKE POINT DR.

City  
CLAYTONState  
NCZip Code  
27527-5218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.22

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673185**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

126.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2528 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, CAROL, W., ,**

Mailing Address 112 LAKE POINT DR.

City  
CLAYTONState  
NCZip Code  
27527-5218FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673932**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, JIMMY, O., MR.,**

Mailing Address 1075 MOTORCOACH DR

City  
POLK CITYState  
FLZip Code  
33868-5113FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674378**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOLCOTT, BERNARD, , ,**

Mailing Address 603 DABNEYS RD.

City  
RAPHINEState  
VAZip Code  
24472-2815FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675592**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

154.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2529 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODS, ELYSE, , MS.,**

Mailing Address 25341 CORTE SOMBRERO

City  
MURRIETAState  
CAZip Code  
92563-5230FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.54

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27673338**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOOTTEN, RIKE, , ,**Mailing Address 2100 S JOSEPHINE ST  
UNIT 4106City  
DENVERState  
COZip Code  
80210-4852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672614**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOOTTEN, RIKE, , ,**Mailing Address 2100 S JOSEPHINE ST  
UNIT 4106City  
DENVERState  
COZip Code  
80210-4852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2025**Transaction ID : SA11A.27672623**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

117.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2530 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WYANDT, YON, , ,**

Mailing Address 3739 SPRING COULEE RD

City  
BELLINGHAMState  
WAZip Code  
98226-8887FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673081**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674568**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674911**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2531 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNGBLUT, JOANNE, M., DR.,**

Mailing Address 1655 KNUDSON RUN

City  
THE VILLAGESState  
FLZip Code  
32163-5415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674595**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZAPERACH, TERRY, , ,**

Mailing Address 746 LANTANA ST.

City  
COCOAState  
FLZip Code  
32926-5246FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27673217**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZEIGLER, DANIEL, F., MR.,**

Mailing Address 1088 LOCKCUFF RD

City  
WILLIAMSPORTState  
PAZip Code  
17701-8532FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

448.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27675599**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2532 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZELLMER, GENE, , ,**

Mailing Address 25845 S. CARMEL HILLS DR.

City  
CARMELState  
CAZip Code  
93923-8310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674845**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZELLMER, GENE, , ,**

Mailing Address 25845 S. CARMEL HILLS DR.

City  
CARMELState  
CAZip Code  
93923-8310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2025**Transaction ID : SA11A.27674863**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11C.27678154**

Amount of Each Receipt this Period

91865.51

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2533 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679000**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680803**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALFARO, ROSA, , ,**

Mailing Address 3059 HAWKSCREST DR

City  
WINCHESTERState  
CAZip Code  
92596-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

710.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679005**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2534 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRIS

State  
GA

Zip Code  
30582-1957

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27679374**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLS

State  
CA

Zip Code  
95762-5814

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WESTWOOD HOMES, INC.

Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27678572**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARTEL, CRAIG, , ,**

Mailing Address 1850 LEWIS CT

City  
DENVER

State  
CO

Zip Code  
80215-2831

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

219.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27678324**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

65.37

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2535 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARTONE, VIRGINIA, , ,

Mailing Address 3009 MUMBARTO AVENUE

City  
BOISEState  
IDZip Code  
83713-5082FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679895

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BAUGHMAN, JO ANN, , MS.,

Mailing Address P.O. BOX 1269

City  
PHILOMATHState  
ORZip Code  
97370-1269FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678645

Amount of Each Receipt this Period

42.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BAYDALA, THOMAS, , ,

Mailing Address 11 YORK ST

City  
MALVERNEState  
NYZip Code  
11565-2313FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BAY ENGINEERING SYSTEMSOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680699

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

83.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2536 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAYLESS, CHERYL, , ,**

Mailing Address P.O. BOX 380

City  
RIDGWAY

State  
CO

Zip Code  
81432-0380

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27679417**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BELL, ELIZABETH, A., MS.,**

Mailing Address 2421 AMARILLO DR

City  
O FALLON

State  
MO

Zip Code  
63368-3575

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IPC

Occupation (for Individual)  
MEDICAL ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.51

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27678504**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BENSON, PATTI, , ,**

Mailing Address PO BOX 158

City  
EUREKA

State  
NV

Zip Code  
89316-0158

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27679974**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

67.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2537 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERG, ELIZABETH, , ,**Mailing Address 555 MAIN ST  
APT 606SCity  
NEW YORKState  
NYZip Code  
10044-0165FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.04

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679210**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERRY, MARILYN, , ,**

Mailing Address 40242 E LOUISIANA

City  
BENNETTState  
COZip Code  
80102-8436FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680023**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEST, SAMMY, L., ,**

Mailing Address 1807 FM 3240

City  
BANDERAState  
TXZip Code  
78003-5233FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1027.21

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681243**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

64.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2538 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680518**

Amount of Each Receipt this Period

135.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLACK, TIMOTHY, , ,**

Mailing Address 9811 198TH AVENUE CT. E

City

BONNEY LAKE

State

WA

Zip Code

98391-5951

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DHSOccupation (for Individual)  
LEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678187**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLAHNIK, PATRICIA, C., ,**

Mailing Address 258 N WEST END BLVD, #312

City

QUAKERTOWN

State

PA

Zip Code

18951-2324

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

228.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680263**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.74

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2539 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLANTON, JENNIFER, , ,**

Mailing Address 1989 NESMITH ROAD

City  
NESMITH

State  
SC

Zip Code  
29580-3336

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SANTEE COOPER

Occupation (for Individual)  
SR. INVENTORY SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.98

Date of Receipt

**02** / **12** / **2025**

**Transaction ID : SA11A.27679309**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLUMEL, GEORGE, , ,**

Mailing Address 316 NORTH COUNTRY CLUB DRIVE

City  
LAKE WORTH

State  
FL

Zip Code  
33462-1002

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.74

Date of Receipt

**02** / **12** / **2025**

**Transaction ID : SA11A.27680952**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLYE, MARJORIE, A., ,**

Mailing Address 60 AVALON WAY

City  
SHARPSBURG

State  
GA

Zip Code  
30277-2093

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.41

Date of Receipt

**02** / **12** / **2025**

**Transaction ID : SA11A.27679034**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

134.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2540 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOATMAN, RICHARD, , ,**

Mailing Address 512 BERKSHIRE DR.

City  
TROYState  
ILZip Code  
62294-1288FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680460**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOBZIEN, ANN, , ,**

Mailing Address 52 RAVEN DRIVE

City

ROCKY POINT

State

NC

Zip Code

28457-9440

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678879**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOBZIEN, ANN, , ,**

Mailing Address 52 RAVEN DRIVE

City

ROCKY POINT

State

NC

Zip Code

28457-9440

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

583.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679581**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

290.82



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2541 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOBZIEN, ANN, , ,**

Mailing Address 52 RAVEN DRIVE

City  
ROCKY POINTState  
NCZip Code  
28457-9440FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.89

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680373**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BONIN, JO, , ,**

Mailing Address 2217133RDST.SW

City  
LYNNWOODState  
WAZip Code  
98087-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680587**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BONIN, JUDY, , ,**

Mailing Address 187 EDGEFIELD LANE

City  
STAUNTONState  
VAZip Code  
24401-6287FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
HORSE BOARDING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

264.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678163**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2542 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BONN, JOHN, W., MR.,**

Mailing Address 3815 DARBYSHIRE DR

City  
HILLIARDState  
OHZip Code  
43026-2535FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

ENGRG CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681077**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680959**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYDA, KENNETH, , ,**

Mailing Address 1200 BARTON CREEK BLVD, #58

City  
AUSTINState  
TXZip Code  
78735-1633FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

387.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679463**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

165.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2543 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYLE, WILLIAM, , ,**

Mailing Address 4807 FAIRFORD DR.

City  
SAN ANTONIOState  
TXZip Code  
78228-1013FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MILITARY MINISTRY OF CRUOccupation (for Individual)  
FIELD MISSIONARY STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679970**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRADDOCK, DAVID, , ,**

Mailing Address P O BOX 601176

City  
DALLASState  
TXZip Code  
75360-1176FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

928.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680673**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRADDOCK, DAVID, , ,**

Mailing Address P O BOX 601176

City  
DALLASState  
TXZip Code  
75360-1176FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

928.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680757**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

315.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2544 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROADHEAD, ANN, B., ,**

Mailing Address PO BOX 2348

City  
KILL DEVIL HILLSState  
NCZip Code  
27948-2348FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.60

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680763**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROADHEAD, ANN, B., ,**

Mailing Address PO BOX 2348

City  
KILL DEVIL HILLSState  
NCZip Code  
27948-2348FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.60

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680765**

Amount of Each Receipt this Period

3.96

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROADHEAD, ANN, B., ,**

Mailing Address PO BOX 2348

City  
KILL DEVIL HILLSState  
NCZip Code  
27948-2348FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

298.60

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680770**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2545 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROADHEAD, ANN, B., ,**

Mailing Address PO BOX 2348

City  
KILL DEVIL HILLSState  
NCZip Code  
27948-2348FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680785**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679887**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701-3163FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

579.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678416**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

68.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2546 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701-3163FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.96

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678425**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701-3163FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.96

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678427**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701-3163FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

579.96

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678433**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

42.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2547 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701-3163FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.96

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678436**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701-3163FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.96

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678465**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701-3163FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

579.96

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678470**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2548 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701-3163FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678482**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701-3163FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678485**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUCHANAN, JAMES, F., MR.,**

Mailing Address 217 ROSEBUD AVE

City  
CORPUS CHRISTIState  
TXZip Code  
78404-1734FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WELDER LESHIN LLPOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679715**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2549 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITYState  
NJZip Code  
08226-2367FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678970**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITYState  
NJZip Code  
08226-2367FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679087**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITYState  
NJZip Code  
08226-2367FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

553.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679103**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2550 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUDGE, WILLIAM, A., MR.,**

Mailing Address 402 EMERALD BAY

City  
LAGUNA BEACHState  
CAZip Code  
92651-1215FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679493**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUDRAS, JOSEPH, , MR.,**

Mailing Address 3432 PUTNAM ST

City  
FALLS CHURCHState  
VAZip Code  
22042-3727FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680519**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUI, LANG, , MS.,**

Mailing Address 3704 BELLAIR BLVD

City  
HOUSTONState  
TXZip Code  
77025-1207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680086**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2551 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUNN, KAY, , ,**

Mailing Address 1908 GAINESWOOD DR

City  
TUSCALOOSAState  
ALZip Code  
35406-3558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.15

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679593**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURLAND, ALICE, , ,**

Mailing Address 4214 WATERBECK ST

City  
FULSHEARState  
TXZip Code  
77441-3904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.86

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680084**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURNETT, DAVID, C., MR.,**

Mailing Address 4420 HILHAM ROAD

City  
COOKEVILLEState  
TNZip Code  
38506-7118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOUCHENS FOOD GROUPOccupation (for Individual)  
VP DIRECTOR OF OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680745**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

134.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2552 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURNS, MICHAEL, J., ,**

Mailing Address 7287 HORIZON DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.44

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681106**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUSS, DIETRICH, G., MR.,**

Mailing Address 1518 CAMINO DEL SOL

City  
FULLERTONState  
CAZip Code  
92833-1915FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.32

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679749**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679325**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2553 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARBONELL, NESTOR, T., MR.,**Mailing Address 600 GRAPETREE DR.  
APT 8CNCity  
KEY BISCAVNEState  
FLZip Code  
33149-2704FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680633**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678744**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678846**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2554 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678913**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678924**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679024**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2555 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680134**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680137**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681164**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

43.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2556 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681165

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681166

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681168

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.97



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2557 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681170**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681177**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARR, HARLEY, , MR.,**

Mailing Address 17011 CEDAR PLZ APT 6C

City  
OMAHAState  
NEZip Code  
68130-2379FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

482.38

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679403**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2558 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CASPERSON, CAROLINA, , MS.,**

Mailing Address 100 SAINT PAUL ST, STE 700

City  
DENVERState  
COZip Code  
80206-5143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MUSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679941**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CASSENTI, JEAN, , ,**

Mailing Address 29 ARNOLD DR

City  
TOLLANDState  
CTZip Code  
06084-2810FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680424**

Amount of Each Receipt this Period

20.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678659**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2559 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678682**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHAKNIS, GEORGE, , ,**

Mailing Address 616 SEA OATS DR

City  
DESTINState  
FLZip Code  
32541-2418FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681061**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANA, MAGHAR, S., MR.,**

Mailing Address 315 MERCEDES LANE

City  
COLBURNState  
INZip Code  
47905-4566FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.51

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681135**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

31.21

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2560 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANA, MAGHAR, S., MR.,**

Mailing Address 315 MERCEDES LANE

City  
COLBURN

State  
IN

Zip Code  
47905-4566

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.51

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27681136**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANDRA, HAROLD, , ,**

Mailing Address 132 OLD LAKE ST

City  
WEST HARRISON

State  
NY

Zip Code  
10604-1611

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.14

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680996**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHARLTON, VINCENT, R., ,**

Mailing Address 104 CREEK POINT CT

City  
COLONIAL HEIGHTS

State  
VA

Zip Code  
23834-2215

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.93

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27679553**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

44.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2561 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHARLTON, VINCENT, R., ,**

Mailing Address 104 CREEK POINT CT

City  
COLONIAL HEIGHTSState  
VAZip Code  
23834-2215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2025

**Transaction ID : SA11A.27679564**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHASE, KENNETH, R., MR.,**

Mailing Address 12227 RIOS RD

City  
SAN DIEGOState  
CAZip Code  
92128-2703FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2025

**Transaction ID : SA11A.27678798**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHASE, RICHARD, , ,**

Mailing Address 2370 YORK ROAD, SUITE C4

City  
JAMISONState  
PAZip Code  
18929-1031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CHASE & ASSOCIATES, INC.Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2025

**Transaction ID : SA11A.27681149**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2562 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONLEY, MARK, , ,**

Mailing Address 4312 N. BAYWOOD DRIVE

City  
HERNANDOState  
FLZip Code  
34442-6526FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679748**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678169**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.19

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680135**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2563 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680214**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680229**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONSTANTINE, RUSSELL, , ,**

Mailing Address 209 ROBIN HOOD PL DR

City  
COVINGTONState  
LAZip Code  
70433-4762FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679348**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

42.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2564 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COOMBES, JIM, , MR.,**Mailing Address 7031 BEACH DR. SW  
APT DCity  
SEATTLEState  
WAZip Code  
98136-2095FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONSTRUCTION PLANNING AND M.Occupation (for Individual)  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678919

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COOMBES, JIM, , MR.,**Mailing Address 7031 BEACH DR. SW  
APT DCity  
SEATTLEState  
WAZip Code  
98136-2095FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONSTRUCTION PLANNING AND M.Occupation (for Individual)  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680284

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COOPER, J., LEWIS, , JR.**

Mailing Address 743 LOCHMOOR BLVD

City  
GROSSE POINTE WOODState  
MIZip Code  
48236-4008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GREAT LAKES WINE SPIRITSOccupation (for Individual)  
BOARD MEMBER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679914

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

346.50



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2565 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORTESE, FRIEDA, , ,**

Mailing Address 24 WESTBOURNE LANE

City  
MELVILLEState  
NYZip Code  
11747-3305FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.82

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680040**

Amount of Each Receipt this Period

9.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COX, JUNE, , ,**

Mailing Address 159 NTH 4TH AVE

City  
FORSYTHState  
MTZip Code  
59327-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.74

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678592**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRESS, WILLIAM, E., MR.,**Mailing Address 1304 REDBUD ST  
APT 202City  
YUKONState  
OKZip Code  
73099-5656FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.91

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679555**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

54.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2566 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CROUCH, DENNIS, E., COL., USAF RET**

Mailing Address 3069 RANCHFIELD DR

City  
BEAVERCREEKState  
OHZip Code  
45432-2610FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679385**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CUMMINGS, MARK, , ,**

Mailing Address 409 ARNO ST SE

City  
ALBUQUERQUEState  
NMZip Code  
87102-3559FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681033**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CUNNINGHAM, RONALD, , MR.,**

Mailing Address 4368 E 58TH ST

City  
TULSAState  
OKZip Code  
74135-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICAN ELECTRIC POWEROccupation (for Individual)  
IT ENTERPRISE ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

462.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678542**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.03

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2567 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURRY, ROBERT, J., ,**

Mailing Address 1205 ANDTE CIR.

City  
CLAREMORE

State  
OK

Zip Code  
74017-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27678858**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAGEL, CAROL, K., ,**

Mailing Address 46356 166TH ST

City  
WATERTOWN

State  
SD

Zip Code  
57201-8767

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OWNER OPERATOR DAGEL FARMS

Occupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27679416**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAIGLE, WAYNE, E., ,**

Mailing Address 210 SOUTH ST.

City  
BAYTOWN

State  
TX

Zip Code  
77520-3764

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27681124**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

98.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2568 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DALE, PAMELA, , ,**

Mailing Address 18890 TIMBERLAKE DR

City  
CLAREMOREState  
OKZip Code  
74017-1443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679145**

Amount of Each Receipt this Period

34.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678825**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DE BEUKELAER, PETER, , ,**

Mailing Address 182 SWAN SEA LANE

City  
MADISONState  
MSZip Code  
39110-9429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PETER DE BEUKELAEROccupation (for Individual)  
PRESIDENT DBC CORP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

503.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679870**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

216.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2569 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DE MARTINO, VINCENT, R., MR.,**

Mailing Address 4281 AVOCADO AVE

City  
YORBA LINDAState  
CAZip Code  
92886-2572FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ROCKWELLOccupation (for Individual)  
ENGINEERING MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678984**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681113**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DENHOFF, DIANE, K., ,**

Mailing Address 1908 STATE ROUTE 19

City  
WELLSVILLEState  
NYZip Code  
14895-9740FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681249**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2570 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DENHOFF, DIANE, K., ,**

Mailing Address 1908 STATE ROUTE 19

City  
WELLSVILLEState  
NYZip Code  
14895-9740FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.26

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681255**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DILGER, HERBERT, , ,**

Mailing Address 6258 N LEROY AVE

City  
CHICAGOState  
ILZip Code  
60646-4832FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE PROF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.44

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679536**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIMARIO, JAMES, , ,**

Mailing Address 7657 WINNETKA AVE

City  
WINNETKAState  
CAZip Code  
91306-2677FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PROPERTY MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

378.82

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679889**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

142.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2571 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIONNE, DOUGLAS, , ,**

Mailing Address 6122 WINDY KNL

City  
WINDCRESTState  
TXZip Code  
78239-2655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680957

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOANE, JIM, P., MR.,**

Mailing Address 3460 MINGLEWOOD DR.

City  
BEAUMONTState  
TXZip Code  
77703-2736FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679570

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DONNER, DENNIS, , MR.,**

Mailing Address 1951 E MARSHALL AVE

City  
PHOENIXState  
AZZip Code  
85016-3017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679216

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

234.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2572 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DONOVAN, ANNE, , ,**

Mailing Address 4 WEDGE LANE

City  
SELDENState  
NYZip Code  
11784-3309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.14

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679393

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRIGGERS, PATRICIA, , ,**

Mailing Address 126 PECAN ROW LANE

City  
ALEXANDRIAState  
LAZip Code  
71303-8711FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.61

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678260

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DRIGGERS, PATRICIA, , ,**

Mailing Address 126 PECAN ROW LANE

City  
ALEXANDRIAState  
LAZip Code  
71303-8711FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

369.61

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678262

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.28



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2573 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DRIGGERS, PATRICIA, , ,**

Mailing Address 126 PECAN ROW LANE

City  
ALEXANDRIAState  
LAZip Code  
71303-8711FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678263**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRIGGERS, PATRICIA, , ,**

Mailing Address 126 PECAN ROW LANE

City  
ALEXANDRIAState  
LAZip Code  
71303-8711FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678264**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DRIGGERS, PATRICIA, , ,**

Mailing Address 126 PECAN ROW LANE

City  
ALEXANDRIAState  
LAZip Code  
71303-8711FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

369.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678267**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

218.62

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2574 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUGAS, ROLAND, , MR.,**

Mailing Address 408 ELYSIAN FIELDS DR

City  
LAFAYETTE

State  
LA

Zip Code  
70508-6058

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.87

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680917**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUTCHER, MICHAEL, A., MR.,**

Mailing Address 6628 TANGLEWOOD RD

City  
SAN DIEGO

State  
CA

Zip Code  
92111-4146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.31

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680455**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINN

State  
TX

Zip Code  
78563-0056

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680683**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

80.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2575 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EATON, DAN, , ,**

Mailing Address 216 OAK HEIGHTS DRIVE

City  
OAKDALEState  
PAZip Code  
15071-1138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSTRUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680544

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EBNER, EILEEN, , ,**

Mailing Address 14 ALGIERS LANE

City  
CHEEKTOWAGAState  
NYZip Code  
14225-4704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679040

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-6174FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

640.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679205

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

154.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2576 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EDWARDS, SHEFFIELD, , , III**

Mailing Address 13256 GOLDEN DRIVE

City  
SUMERDUCKState  
VAZip Code  
22742-1714FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EDWARDS CUSTOMOccupation (for Individual)  
POOL PLASTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.36

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681075**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELIASSEN, JAMES, M., DR.,**

Mailing Address 1205 20TH ST SO

City  
VIRGINIAState  
MNZip Code  
55792-3724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681186**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELLESTAD, BOYD, ALLEN, MR.,**

Mailing Address 30508 SANTA LUNA DR.

City  
RANCHO PALOS VERDEState  
CAZip Code  
90275-6318FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

622.12

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678404**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2577 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELLESTAD, BOYD, ALLEN, MR.,**

Mailing Address 30508 SANTA LUNA DR.

City  
RANCHO PALOS VERDEState  
CAZip Code  
90275-6318FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.12

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678408**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680573**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ESPINOZA, MICHAEL, , ,**Mailing Address 4011 72ND ST  
APT 2CCity  
WOODSIDEState  
NYZip Code  
11377-3031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FLYLIFEOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.25

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680348**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

439.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2578 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EWING, DONNA, , MS.,**

Mailing Address 18106 REDBUD CIRCLE

City  
FOUNTAIN VALLEYState  
CAZip Code  
92708-5753FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.61

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678981**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681172**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681173**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2579 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681174

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681176

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FALLON, JOHN, , ,**Mailing Address 2702 DOUGLAS AVE  
#125City  
DALLASState  
TXZip Code  
75219-3456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678797

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2580 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FALLON, JOHN, , ,**Mailing Address 2702 DOUGLAS AVE  
#125City  
DALLASState  
TXZip Code  
75219-3456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678835

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678681

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

605.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681281

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.82



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2581 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679880**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FERGUSON, WILLIAM, JOHN, MR.,**

Mailing Address 286 HIBBING CIR

City  
MARINAState  
CAZip Code  
93933-3552FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MPVSDOccupation (for Individual)  
CUSTODIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.71

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680157**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FERREE, CAROLYN, R., MS.,**

Mailing Address 5147 BRANDILES LN.

City  
WINSTON SALEMState  
NCZip Code  
27104-5057FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.71

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678461**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

132.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2582 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FIOLA, SHARON, , ,**

Mailing Address 2041 UTAH RD

City  
RANTOULState  
KSZip Code  
66079-9024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.91

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681000**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFFState  
AZZip Code  
86005-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.05

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680337**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFFState  
AZZip Code  
86005-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

709.05

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680343**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

49.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2583 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLEMING, PAT, , ,**

Mailing Address 116 BLUE SKY DRIVE

City  
SAINT JOHNSState  
FLZip Code  
32259-7369FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679197

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLOWERS, MARY, , ,**

Mailing Address P.O. BOX 1231

City  
CODYState  
WYZip Code  
82414-1231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679057

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FONTANA, BETTY, , MRS.,**

Mailing Address 2090 LEEWARD LN

City  
MERRITT ISLANDState  
FLZip Code  
32953-3082FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680706

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2584 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORCIER, RONALD, , ,**

Mailing Address 5 BISHOP ROAD APT303

City  
WEST HARTFORDState  
CTZip Code  
06119-1538FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679562**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679839**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680371**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2585 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRANZMEIER, ALVIN, H., DR.,**Mailing Address 1300 S BORDER  
APT 731City  
WESLACOState  
TXZip Code  
78596-7441FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681095**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRITZ, DOUGLAS, , ,**

Mailing Address 3520 NORTH CALLE VISTOSA

City  
TUCSONState  
AZZip Code  
85750-2705FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679876**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRUGE, RUBY, JOYCE, ,**

Mailing Address 2004 HIGHWAY 103

City  
PORT BARREState  
LAZip Code  
70577-5310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

751.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679798**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2586 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FULKS, MICHAEL, , ,**

Mailing Address 15025 STRATUS LOOP APT. 204

City  
WINTER GARDENState  
FLZip Code  
34787-7909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DISNEYOccupation (for Individual)  
ATTRACTIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681082**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALLAGHER, MARY, , MRS.,**

Mailing Address 647 CHEVY CHASE CIR

City  
SUGAR LANDState  
TXZip Code  
77478-3601FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679769**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GAMMON, SIBLEY, , ,**

Mailing Address 4 REFLECTION LANE

City  
TRABUCO CANYONState  
CAZip Code  
92679-5100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679809**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

254.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2587 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679804

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GANO, JOHN, , ,**

Mailing Address P.O. BOX 6038

City  
TYLERState  
TXZip Code  
75711-6038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680853

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GANO, JOHN, , ,**

Mailing Address P.O. BOX 6038

City  
TYLERState  
TXZip Code  
75711-6038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680916

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

153.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2588 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GATTO, PAMELA, , ,**

Mailing Address 15 W. HIBISCUS BLVD

City  
MELBOURNEState  
FLZip Code  
32901-3017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MIKE GATTO, INCOccupation (for Individual)  
TIRE DEALER/BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679642**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAYNOR, GEORGE, N., MR.,**Mailing Address 1500 N. LAKE SHORE DR.  
STE 1720City  
CHICAGOState  
ILZip Code  
60610-6686FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENTS/TRADING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678762**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GAYNOR, GEORGE, N., MR.,**Mailing Address 1500 N. LAKE SHORE DR.  
STE 1720City  
CHICAGOState  
ILZip Code  
60610-6686FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENTS/TRADING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680525**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

249.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2589 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GERSEK, BARBARA, , ,**

Mailing Address 2153 ONTARIO ROAD

City  
GREEN BAYState  
WIZip Code  
54311-5016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.28

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678990**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GHEBREMEDHIN, BERHANE, , ,**

Mailing Address 1520 DOVE CY

City  
PASADENAState  
CAZip Code  
91107-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DPSS LA COUNTYOccupation (for Individual)  
ELIGIBILITY SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1270.36

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681221**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILLARD, SCOTT, , ,**

Mailing Address 212 ELM ST

City  
HANOVERState  
MAZip Code  
02339-2832FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ALVIN HOLLISOccupation (for Individual)  
HVAC TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.03

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678723**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.51

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2590 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLADSTONE, VICKI, , ,**

Mailing Address 12 ENCORE LN

City  
ALISO VIEJO

State  
CA

Zip Code  
92656-2810

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
TVT SCHOOL

Occupation (for Individual)  
RECEPTIONIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.41

Date of Receipt

**02** / **12** / **2025**

**Transaction ID : SA11A.27679936**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLAS

State  
TX

Zip Code  
75240-4488

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORK

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

**02** / **12** / **2025**

**Transaction ID : SA11A.27679984**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLAS

State  
TX

Zip Code  
75240-4488

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORK

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

**02** / **12** / **2025**

**Transaction ID : SA11A.27679986**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

192.05

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2591 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLAS

State  
TX

Zip Code  
75240-4488

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORK

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

02 / 12 / 2025

**Transaction ID : SA11A.27679988**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLAS

State  
TX

Zip Code  
75240-4488

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORK

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

02 / 12 / 2025

**Transaction ID : SA11A.27679992**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLAS

State  
TX

Zip Code  
75240-4488

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORK

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

02 / 12 / 2025

**Transaction ID : SA11A.27679993**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

130.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2592 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679997

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679998

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680000

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

111.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2593 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680008

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLENN, SAMUEL, , , JR.**Mailing Address 5490 ARBOR BRANCH DR.  
APT 234City  
SHALLOTTEState  
NCZip Code  
28470-6111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680111

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLIME, RAYMOND, , ,**Mailing Address 14750 LAKESIDE CIR  
APT 431City  
STERLING HEIGHTSState  
MIZip Code  
48313-1381FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680005

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

141.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2594 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GONZALEZ-BOHORQUEZ, FELIX, E., ,**

Mailing Address 827 BOWIE ROAD

City  
ROCKVILLE

State  
MD

Zip Code  
20852-1042

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.77

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680404**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GONZALEZ-BOHORQUEZ, FELIX, E., ,**

Mailing Address 827 BOWIE ROAD

City  
ROCKVILLE

State  
MD

Zip Code  
20852-1042

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.77

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680406**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GONZALEZ-BOHORQUEZ, FELIX, E., ,**

Mailing Address 827 BOWIE ROAD

City  
ROCKVILLE

State  
MD

Zip Code  
20852-1042

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.77

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680432**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

91.43

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2595 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOODYEAR, PRISCILLA, A., MS.,**

Mailing Address 10042 SIGNET CIRCLE

City  
HUNTINGTON BEACH

State  
CA

Zip Code  
92646-6631

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27679942**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADE

State  
FL

Zip Code  
33841-9531

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27678739**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADE

State  
FL

Zip Code  
33841-9531

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

415.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27679012**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

103.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2596 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679020**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORDON, LOUISE, , ,**

Mailing Address 4075 BROOKS MILL DRIVE

City  
LITHONIAState  
GAZip Code  
30038-4143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1230.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681159**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, LOUISE, , ,**

Mailing Address 4075 BROOKS MILL DRIVE

City  
LITHONIAState  
GAZip Code  
30038-4143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1230.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681167**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

4.04

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2597 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORE, TRINA, , ,**

Mailing Address 14321 SOUTHWEST 20TH STREET

City  
DAVIEState  
FLZip Code  
33325-5426FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678306**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORE, TRINA, , ,**

Mailing Address 14321 SOUTHWEST 20TH STREET

City  
DAVIEState  
FLZip Code  
33325-5426FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678379**

Amount of Each Receipt this Period

38.52

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORE, TRINA, , ,**

Mailing Address 14321 SOUTHWEST 20TH STREET

City  
DAVIEState  
FLZip Code  
33325-5426FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1001.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678771**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.78

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2598 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GORGES, MATT, , ,

Mailing Address 6030 N LITCHFIELD RD

City  
LITCHFIELD PARKState  
AZZip Code  
85340-5240FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678451

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOTTLIEB, STEPHEN, , ,

Mailing Address 705 CORELLI COVE ST

City  
HENDERSONState  
NVZip Code  
89011-5523FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680423

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRECH, ANGELA, , ,

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681246

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

51.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2599 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREENWOOD, KEITH, , ,**

Mailing Address 1250 S SANDBRANCH

City  
MOUNT HOPEState  
WVZip Code  
25880-9068FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PLUMBER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678511**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, LINDA, , ,**

Mailing Address 15657 FM 244

City  
IOLAState  
TXZip Code  
77861-3867FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680015**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREINER, MICHAEL, J., ,**

Mailing Address PO BOX 621

City  
MARSTONS MILLSState  
MAZip Code  
02648-0621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

945.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680199**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2600 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIFFIN, MARY, , ,**

Mailing Address 318E. CENTRAL STREET

City  
FAIRVIEWState  
OKZip Code  
73737-2130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680155

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIFFIN, MARY, , ,**

Mailing Address 318E. CENTRAL STREET

City  
FAIRVIEWState  
OKZip Code  
73737-2130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680160

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIFFIN, MARY, , ,**

Mailing Address 318E. CENTRAL STREET

City  
FAIRVIEWState  
OKZip Code  
73737-2130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

253.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680168

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2601 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680971**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680974**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680976**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10.95

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2602 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKE

State  
IN

Zip Code  
46303-0776

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27680978**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKE

State  
IN

Zip Code  
46303-0776

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27680980**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKE

State  
IN

Zip Code  
46303-0776

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27680983**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

18.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2603 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROGAN, KIMBERLY, , ,**

Mailing Address PO BOX 875

City  
MANHATTAN BEACHState  
CAZip Code  
90267-0875FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680061**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUENTHER, HART, , ,**

Mailing Address 34 CHOWNING DR.

City  
HAMPTONState  
VAZip Code  
23664-1737FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678178**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUM, GAYLE, , MS.,**

Mailing Address 509 VISTA CV

City  
VICTORIAState  
TXZip Code  
77904-1310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRADY BEARINGOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

645.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679679**

Amount of Each Receipt this Period

45.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2604 OF 6441  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HACKL, MARK, , ,**

Mailing Address 485 HICKORY NUT AVE

City  
OLDSMAR

State  
FL

Zip Code  
34677-2016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.15

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680269**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMLIN, DENNIS, , ,**

Mailing Address 18735 CORSINI DRIVE

City  
SAN ANTONIO

State  
TX

Zip Code  
78258-1629

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.04

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27679097**

Amount of Each Receipt this Period

23.42

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAN, NAM, , ,**

Mailing Address 17315 INDIGO MIST COURT

City  
HOUSTON

State  
TX

Zip Code  
77084-1987

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF INDEPENDENT AGENT

Occupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

296.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27678244**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

67.17



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2605 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAN, NAM, , ,**

Mailing Address 17315 INDIGO MIST COURT

City  
HOUSTONState  
TXZip Code  
77084-1987FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF INDEPENDENT AGENTOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679372**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSON, BOB, , ,**

Mailing Address 1326 HICKORYCREEK CT.

City  
WICHITAState  
KSZip Code  
67235-7000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WEIGAND OMEGA MGTOccupation (for Individual)  
PROPERTY MGT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

841.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679566**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARDIN, BRET, , ,**

Mailing Address 455 E.OCEAN BLVD #301

City  
LONG BEACHState  
CAZip Code  
90802-4937FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678452**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

128.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2606 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, BARBARA, A., MS.,**

Mailing Address 9112 W 131ST TER.

City  
OVERLAND PARKState  
KSZip Code  
66213-3096FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.95

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678350**

Amount of Each Receipt this Period

14.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679355**

Amount of Each Receipt this Period

0.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680398**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

24.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2607 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680401**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680403**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680405**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2608 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680410**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARWARD, JAMES, , ,**

Mailing Address 322 NEW KENT PLACE

City  
CARYState  
NCZip Code  
27511-4584FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678877**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARWARD, JAMES, , ,**

Mailing Address 322 NEW KENT PLACE

City  
CARYState  
NCZip Code  
27511-4584FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

493.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680114**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2609 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAYDEN, AMANDA, , ,**

Mailing Address 6 RED BARN ROAD

City  
HYDE PARKState  
NYZip Code  
12538-1941FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678407**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAYES, DELMORE, G., MR.,**

Mailing Address 81862 SUN CACTUS LN

City  
LA QUINTAState  
CAZip Code  
92253-7745FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680078**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEATHMAN, CHRISTINE, , ,**

Mailing Address 1119 SOUTH SAGE CREEK COURT

City  
HEBER CITYState  
UTZip Code  
84032-4169FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLYMED PLUSOccupation (for Individual)  
FORMULATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1144.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679051**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

99.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2610 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEFFLEBOWER, BARBARA, ANN, MS.,**

Mailing Address 4415 NEGAL CIR

City  
MELBOURNEState  
FLZip Code  
32901-8503FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678631**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEINRICH, SARAH, J., MRS.,**

Mailing Address 6004 AMBER OAKS AVE

City  
BAKERSFIELDState  
CAZip Code  
93306-7008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679534**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEISTAND, JOHN, , ,**

Mailing Address 614 TIMBERLANE DR

City  
LAKE MARYState  
FLZip Code  
32746-2571FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679479**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2611 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEITZ, MARK, V., MR.,**

Mailing Address 260 SW YORKSHIRE ROAD

City  
TOPEKAState  
KSZip Code  
66606-2283FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1438.73

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678916**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HELLER, MICHAEL, , ,**

Mailing Address 231 SUNNYSIDE AVE.

City  
PIEDMONTState  
CAZip Code  
94611-4455FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678186**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENDERSON, GREG, , ,**

Mailing Address 6 POWER WAY

City  
STAFFORDState  
VAZip Code  
22554-6516FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678633**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

231.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2612 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENTHORN, JIM, , ,**

Mailing Address 242 COUNTY HIGHWAY 183 NORTH

City  
DEFUNIAK SPRINGSState  
FLZip Code  
32433-4394FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680692**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERENDEEN, LISA, , ,**

Mailing Address 282 APPIAN WAY

City  
UNION CITYState  
CAZip Code  
94587-3706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CCDCOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678821**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERENDEEN, LISA, , ,**

Mailing Address 282 APPIAN WAY

City  
UNION CITYState  
CAZip Code  
94587-3706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CCDCOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678823**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.04



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2613 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERENDEEN, LISA, , ,**

Mailing Address 282 APPIAN WAY

City  
UNION CITYState  
CAZip Code  
94587-3706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CCDCOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678826**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERSHBERGER, SHEILA, , ,**

Mailing Address 537 MELROSE ST.

City  
AKRONState  
OHZip Code  
44305-2813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMMUNITY BAPTIST CHURCHOccupation (for Individual)  
PASTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680181**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HESSELEIN, DONALD, , ,**

Mailing Address 4220 ORODAM BLVD E

City  
OROVILLEState  
CAZip Code  
95966-9216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678248**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2614 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HESTER, DON, , ,**

Mailing Address 3981 F. ST.

City  
EUREKAState  
CAZip Code  
95503-6003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681212**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HICKS, JERRY, , ,**

Mailing Address 1261 DENALI DR, #146

City  
FESTUSState  
MOZip Code  
63028-2382FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678935**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679668**

Amount of Each Receipt this Period

60.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

165.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2615 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680414**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679502**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679507**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.99

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2616 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANE

State  
UT

Zip Code  
84737-4408

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.79

Date of Receipt

**02** / **12** / **2025**

**Transaction ID : SA11A.27679512**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANE

State  
UT

Zip Code  
84737-4408

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.79

Date of Receipt

**02** / **12** / **2025**

**Transaction ID : SA11A.27679519**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HINKLE, JAMES, L., MR.,**

Mailing Address 8100 CLYO RD  
# 218

City  
DAYTON

State  
OH

Zip Code  
45458-2720

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.36

Date of Receipt

**02** / **12** / **2025**

**Transaction ID : SA11A.27680315**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

32.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2617 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOBBS, GAYLE, , MRS.,**

Mailing Address 1 VOLK TER

City  
GREAT FALLSState  
MTZip Code  
59405-4128FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680138**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOISINGTON, JACKIE, , ,**

Mailing Address 2625 W RELATION ST

City  
SAFFORDState  
AZZip Code  
85546-4047FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOOPNER ENERGYOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678624**

Amount of Each Receipt this Period

46.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLTEN, JAMES, J., MR.,**

Mailing Address 4003 CHESTNUT OAK DR

City  
SMITHTONState  
ILZip Code  
62285-3741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1366.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679231**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2618 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOPKINS, GEORGE, , ,**

Mailing Address 135 CR 2984

City  
HUGHES SPRINGSState  
TXZip Code  
75656-6715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.85

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678638**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.95

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679968**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

334.95

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680250**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2619 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680252

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680255

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

334.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680260

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2620 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680819**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBER, MARY, R., ,**

Mailing Address 37641 30TH STREET

City  
ELMOREState  
MNZip Code  
56027-2035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680994**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUGHES, KATHLEEN, B., MS.,**

Mailing Address 6400 N COUNTY 75 RD

City  
COLUMBIAState  
ALZip Code  
36319-5124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

243.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680009**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64.96



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2621 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUMPHRIES, CATHY, , ,**

Mailing Address 972 E SEA BISCUIT WAY

City  
WASHINGTONState  
UTZip Code  
84780-3024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.68

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679121**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUVAL, TERRY, , ,**

Mailing Address 136 SHELBY OAKS LANE

City  
LAFAYETTEState  
LAZip Code  
70507-5800FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.98

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679058**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. INGRAM, DALE, , ,**

Mailing Address 2255 TRISTRAM ROAD

City  
CHATTANOOGAState  
TNZip Code  
37421-2639FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ERLANGER MEDICAL CENTEROccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.49

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679819**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2622 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IRRIGER, HEINZ, , MR.,**Mailing Address P.O. BOX 3068  
2798 MONTANA 206City  
COLUMBIA FALLSState  
MTZip Code  
59912-3068FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680156**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IVERS, DONALD, , MR.,**

Mailing Address 1511 PAUL SPRING PARKWAY

City  
ALEXANDRIAState  
VAZip Code  
22308-1143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

723.10

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678711**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACKSON, MARLA, , ,**

Mailing Address 14959 CURRY ST

City  
MORENO VALLEYState  
CAZip Code  
92553-5019FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.89

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680083**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2623 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACOBSON, SHARYN, , ,**

Mailing Address 4681 1ST STREET NE #401

City  
SAINT PETERSBURGState  
FLZip Code  
33703-4947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679073**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAICKS, DANIEL, , ,**

Mailing Address 298 ANGEL OAK DR

City  
BONNEAUState  
SCZip Code  
29431-4001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678769**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680845**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2624 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680846

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680854

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680855

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2625 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680862**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JENNINGS, PAULA, , ,**

Mailing Address 122 QUAIL RUN DR.

City  
WARNER ROBINSState  
GAZip Code  
31088-6504FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680709**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JIN, CHUNHUA, , ,**

Mailing Address 182N NORMANDLE AVE

City  
LOS ANGELESState  
CAZip Code  
90004-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678180**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

335.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2626 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, CAROL, J., ,**

Mailing Address 11409 SARASOTA CT

City  
FREDERICKSBURGState  
VAZip Code  
22407-9100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.10

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680771**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, DOYLE, , ,**

Mailing Address 11648 CAMINITO CORRIENTE

City  
SAN DIEGOState  
CAZip Code  
92128-4540FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FAMILY PHYSICIAN M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.80

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680132**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, HOWARD, , ,**

Mailing Address 8653 FALCON GREEN DR.

City  
WEST PALM BEACHState  
FLZip Code  
33412-1576FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SHOWTIME SPORTS ACADEMYOccupation (for Individual)  
CO-OWNER COACH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678760**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

242.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2627 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSTON, PAMELA, , ,**

Mailing Address 30 OAK KNOLL CIR

City  
LEBANONState  
PAZip Code  
17042-9483FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNWALL LEBANON SCHOOL DISTRICTOccupation (for Individual)  
SPECIAL EDUCATION INSTRUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680611**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSTON, PAMELA, , ,**

Mailing Address 30 OAK KNOLL CIR

City  
LEBANONState  
PAZip Code  
17042-9483FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNWALL LEBANON SCHOOL DISTRICTOccupation (for Individual)  
SPECIAL EDUCATION INSTRUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680615**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSTON, PAMELA, , ,**

Mailing Address 30 OAK KNOLL CIR

City  
LEBANONState  
PAZip Code  
17042-9483FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNWALL LEBANON SCHOOL DISTRICTOccupation (for Individual)  
SPECIAL EDUCATION INSTRUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680617**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

202.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2628 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, PHIL, , MR.,**

Mailing Address 488 BRACKENWOOD LANE S

City  
PALM BEACH GARDENS

State  
FL

Zip Code  
33418-9052

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VAPORSHIELD

Occupation (for Individual)  
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1357.75

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27678794**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGS

State  
ID

Zip Code  
83276-1671

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.88

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27679719**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGS

State  
ID

Zip Code  
83276-1671

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

508.88

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680223**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

322.87



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2629 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, SUSAN, J., MS.,**

Mailing Address 3418 E SUNCREST CT

City  
PHOENIXState  
AZZip Code  
85044-3506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TRAFFICADEOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.78

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678899**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679842**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680481**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2630 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWS

State  
TX

Zip Code  
79714-2010

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.20

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680628**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWS

State  
TX

Zip Code  
79714-2010

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.20

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680935**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROE

State  
TX

Zip Code  
77305-0551

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27681258**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

51.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2631 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEDER, KIRK, , ,**

Mailing Address 24941 FRONT ST

City  
STERLINGState  
ILZip Code  
61081-8874FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.06

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678487**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680960**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681018**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2632 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEISER, ANDREW, , MR.,**

Mailing Address 301 TENNESSEE AVENUE NE

City  
WASHINGTONState  
DCZip Code  
20002-6445FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NAVIGATORS GLOBALOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680659**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KERR, KAT, , ,**

Mailing Address P O BOX 550989

City  
JACKSONVILLEState  
FLZip Code  
32255-0989FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTHOR SPEAKER PROPHET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.75

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681274**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, TANYA, LUNN, MRS.,**

Mailing Address 1048 ELLERBE CT.

City  
SHREVEPORTState  
LAZip Code  
71106-7757FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.38

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679772**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

302.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2633 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.01

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678441**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.01

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678443**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.01

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678444**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2634 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.01

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678446**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.01

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678447**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.01

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678449**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

69.77

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2635 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNAUER, RAYMOND, , ,**

Mailing Address 37804 MOCKINGBIRD AVE

City  
MURRIETAState  
CAZip Code  
92563-7912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679886**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNOWLES, KAREN, , ,**

Mailing Address 308 GRAVES DRIVE

City  
FORESTState  
VAZip Code  
24551-2622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CENTRA HEALTHOccupation (for Individual)  
SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

794.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678898**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNOWLES, RICHARD, N., DR.,**Mailing Address 6083 BAHIA DEL MAR CIRCLE  
UNIT 564City  
SAINT PETERSBURGState  
FLZip Code  
33715-2377FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.65

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679361**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2636 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNUTSON, TERRY, , ,**

Mailing Address 1562 EDGEWOOD DRIVE

City  
LODIState  
CAZip Code  
95240-0453FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.40

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678947**

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City

SPRING HILL

State

FL

Zip Code

34607-4051

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678191**

Amount of Each Receipt this Period

17.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KORENEK, LAWRENCE, , ,**

Mailing Address 421FRELS

City

EL CAMPO

State

TX

Zip Code

77437-2063

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BANKEROccupation (for Individual)  
LENDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.38

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679797**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.96



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2637 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KRAUSS, SAMUEL, , ,**

Mailing Address 3903 NORTH LAWDALE AVENUE

City  
CHICAGOState  
ILZip Code  
60618-3107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOCAL 1Occupation (for Individual)  
IRONWORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.20

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679673**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUHN, ROBERT, , ,**

Mailing Address 3718 LANGTRY DR

City  
AMARILLOState  
TXZip Code  
79109-3926FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.20

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678908**

Amount of Each Receipt this Period

56.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KULBERSH, RICHARD, , MR.,**

Mailing Address 2725 RIDGEWOOD CT

City  
BLOOMFIELD HILLSState  
MIZip Code  
48302-0967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

253.66

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679510**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

191.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2638 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KULBERSH, RICHARD, , MR.,**

Mailing Address 2725 RIDGEWOOD CT

City  
BLOOMFIELD HILLSState  
MIZip Code  
48302-0967FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679515**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KULBERSH, RICHARD, , MR.,**

Mailing Address 2725 RIDGEWOOD CT

City  
BLOOMFIELD HILLSState  
MIZip Code  
48302-0967FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679525**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KULBERSH, RICHARD, , MR.,**

Mailing Address 2725 RIDGEWOOD CT

City  
BLOOMFIELD HILLSState  
MIZip Code  
48302-0967FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

253.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679530**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

29.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2639 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KULBERSH, RICHARD, , MR.,**

Mailing Address 2725 RIDGEWOOD CT

City  
BLOOMFIELD HILLSState  
MIZip Code  
48302-0967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.66

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679546**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.91

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678161**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LALONDE, RICHARD, , ,**

Mailing Address 3332 NW 47TH CT

City  
OCALAState  
FLZip Code  
34482-8322FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

938.79

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681189**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2640 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANCE, TERESA, , ,**

Mailing Address 2004 SIFIELD GREENS WAY

City  
SUN CITY CENTERState  
FLZip Code  
33573-7168FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679466**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAVELY, NANCY, , ,**

Mailing Address 5336 POINTE DR.

City  
EAST CHINAState  
MIZip Code  
48054-4166FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678174**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAYO, LEWIS, DANIEL, MR., SR.**

Mailing Address 2316 W VINE ST

City  
LODIState  
CAZip Code  
95242-3727FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
H&R BLOCK TAX GROUPOccupation (for Individual)  
ENROLLED AGENT/TAX PREPARATIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678282**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

34.79

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2641 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681238

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEAVENS, CAMERON, , ,**

Mailing Address 979 SYIDA DR.

City  
PACIFIC GROVEState  
CAZip Code  
93950-5327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAMERON LEAVENSOccupation (for Individual)  
LAND CARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680207

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEIGH-DARLAND, RYANNE, , ,**Mailing Address 6890 E. SUNRISE DR.  
STE.120-155City  
TUCSONState  
AZZip Code  
85750-0738FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAPSTONE COACHING SERVICESOccupation (for Individual)  
PROFESSIONAL LIFE COACH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680128

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2642 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWIS, ED, , ,**

Mailing Address 19585 NORTH 101ST STREET

City  
SCOTTSDALEState  
AZZip Code  
85255-3786FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678610**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680849**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

967.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680866**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2643 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINDENBERG, LARRY, , MR.,**

Mailing Address 846 DOERFLER DR.

City  
KIMBERLYState  
WIZip Code  
54136-2304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678405**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIPTAK, DAVID, J., MR.,**

Mailing Address 488 MADISON AVE 21ST FLOOR

City  
NEW YORKState  
NYZip Code  
10022-5702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPRING STREET PARTNERSOccupation (for Individual)  
INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678241**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOHMAN, CAROLYN, , ,**

Mailing Address 3229 WALNUT CREEK CT

City  
BRYANState  
TXZip Code  
77807-4852FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

615.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680104**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2644 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOWRY, DIANE, , ,**

Mailing Address 9 WOODRIDGE RD

City  
MOULTRIEState  
GAZip Code  
31768-5815FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679243**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680766**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUND, JOAN, H., MRS.,**

Mailing Address 1705 SPRING CREEK RD

City  
BELVIDEREState  
ILZip Code  
61008-9699FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

284.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680743**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.09



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2645 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUSBY, JOHN, , ,**

Mailing Address 629 MORELOCK SCHOOLHOUSE RD

City  
WESTMINSTERState  
MDZip Code  
21158-3709FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678459**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUTSCHG, VIVIAN, , MRS.,**

Mailing Address 2400 MAPLE ST.

City  
CHADRONState  
NEZip Code  
69337-9369FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678272**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUTTENBERGER, RUDY, , ,**

Mailing Address 17426 N 2ND PL

City  
PHOENIXState  
AZZip Code  
85022-1805FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

793.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680342**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2646 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LYSTIG, CAROLYN, , ,**

Mailing Address 2155 6TH LANE SE, APT 206

City  
CAMBRIDGEState  
MNZip Code  
55008-2528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679314

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACARIO, KELLI, , ,**

Mailing Address 27136 SOUTH INDIAN ROAD

City  
PARK HILLState  
OKZip Code  
74451-3022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679671

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACARIO, KELLI, , ,**

Mailing Address 27136 SOUTH INDIAN ROAD

City  
PARK HILLState  
OKZip Code  
74451-3022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

858.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680716

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

132.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2647 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAKENS, DIANA, , ,**

Mailing Address 3103 CENTER POINT RD

City  
FREDERICKSBURGState  
TXZip Code  
78624-8133FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679293**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680753**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680755**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

348.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2648 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANTHEI, LEAH, , MS.,**

Mailing Address 46646 COUNTY ROAD 613

City  
NASHWAUKState  
MNZip Code  
55769-4515FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680718**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAO, JEREMY, , ,**

Mailing Address 3567 CONSTANCE DR.

City  
SAN JOSEState  
CAZip Code  
95117-1571FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680380**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARSHALL, RONALD, H., ,**

Mailing Address 1990 N US 23

City  
HARRISVILLEState  
MIZip Code  
48740-9777FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679132**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

303.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2649 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680520**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680834**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASSAD, MARCUS, J., MR.,**

Mailing Address 8 DEERHURST

City  
SAN ANTONIOState  
TXZip Code  
78218-6028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

502.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678488**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2650 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASTERS, CARLTON , , ,**

Mailing Address 2127 BRICKELL AVENUE

City  
MIAMIState  
FLZip Code  
33129-2100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GOODWORKS INTERNATIONALOccupation (for Individual)  
DIPLOMAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678381**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASTERS, CARLTON , , ,**

Mailing Address 2127 BRICKELL AVENUE

City  
MIAMIState  
FLZip Code  
33129-2100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GOODWORKS INTERNATIONALOccupation (for Individual)  
DIPLOMAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679857**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATEER, RAYMOND, , ,**

Mailing Address 1278 MATEER RD

City  
KITTANNINGState  
PAZip Code  
16201-8024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

264.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681101**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

99.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2651 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATULA, LOIS, , ,**

Mailing Address 580 FREEMAN LANE

City  
LA VERNIAState  
TXZip Code  
78121-2102FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SALES ASSOCIATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678501**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAY, ANNE, , ,**

Mailing Address 8940 EDGEWOOD DR.

City  
GAITHERSBURGState  
MDZip Code  
20877-1544FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678489**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAYHUGH, RICHARD, , ,**

Mailing Address 1112 TREYMOUR WAY

City  
KNOXVILLEState  
TNZip Code  
37922-5165FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679204**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2652 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAYS, JUSTIN, , ,**

Mailing Address 17269 OHARA DRIVE

City  
PORT CHARLOTTEState  
FLZip Code  
33948-2283FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WORKSITEOccupation (for Individual)  
FINANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1041.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2025

**Transaction ID : SA11A.27679068**

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCBRIDE, JIM, , ,**

Mailing Address 11525 CARNATION DUVALL RD NE

City  
CARNATIONState  
WAZip Code  
98014-9514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2025

**Transaction ID : SA11A.27678367**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2025

**Transaction ID : SA11A.27680919**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

625.72



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2653 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680920**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680924**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680934**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2654 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCURRY, JEFFREY, , ,**

Mailing Address 1431 RIVERPLACE BLVD

City  
JACKSONVILLEState  
FLZip Code  
32207-9028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ST. JOHNOccupation (for Individual)  
ADVERTISING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680326**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCFADDEN, ROYCE, , MR.,**

Mailing Address 1250 FM 168

City  
OLTONState  
TXZip Code  
79064-2118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678205**

Amount of Each Receipt this Period

9.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCFERRIN, JAMES, W., MR.,**

Mailing Address 125 BEVERLY ROAD NE

City  
ATLANTAState  
GAZip Code  
30309-2655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
U. S. ELECTRICOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679313**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2655 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCNEILLWEINER, DANA, , ,**

Mailing Address 132 EMERALD BAY

City  
LAGUNA BEACHState  
CAZip Code  
92651-1209FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678276**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEEHAN, JOAN, , ,**

Mailing Address 2874 GOLDEN GATE AVE

City  
SAN FRANCISCOState  
CAZip Code  
94118-4111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1962.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679544**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEEHAN, JOAN, , ,**

Mailing Address 2874 GOLDEN GATE AVE

City  
SAN FRANCISCOState  
CAZip Code  
94118-4111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1962.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680360**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

197.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2656 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEREDITH, RANDY, , ,**

Mailing Address 266 BULLFINCH ROAD

City  
MOORESVILLEState  
NCZip Code  
28117-5407FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1978.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680402**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEREDITH, RANDY, , ,**

Mailing Address 266 BULLFINCH ROAD

City  
MOORESVILLEState  
NCZip Code  
28117-5407FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1978.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680458**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERKEL, GREG, , ,**

Mailing Address 729 RT3

City  
GAMBRILLSState  
MDZip Code  
21054-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LEOSOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

598.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680261**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2657 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. METHA, RONALD, , ,**

Mailing Address PO BOX1286

City  
LITCHFIELD PARKState  
AZZip Code  
85340-1286FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678310**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEYER, MARK, J., MR.,**

Mailing Address 2002 COLINA CT

City  
ATLANTIC BEACHState  
FLZip Code  
32233-4530FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BKFS, INC.Occupation (for Individual)  
APPLICATION DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679840**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILES, GERALD, , ,**

Mailing Address P.O. BOX 9297

City  
CHARLESTONState  
WVZip Code  
25309-0297FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678316**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2658 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, ANNE, , ,**

Mailing Address 6 RONNA RD

City  
GLOUCESTERState  
MAZip Code  
01930-1665FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1006.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680317**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, ERNEST, , , JR.**

Mailing Address 2807-17 AVENUE

City  
VIENNAState  
WVZip Code  
26105-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680346**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, JAY, P., ,**

Mailing Address 9018 GOLDEN MOUNTAIN CIRCLE

City  
BOYNTON BEACHState  
FLZip Code  
33473-3311FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NEW YORK LIFE INS COOccupation (for Individual)  
REGISTERED REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680625**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2659 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELLState  
NMZip Code  
88201-8659FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678294**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLS, MICHELE, A., MRS.,**

Mailing Address 191 CAPTAIN NATHANIEL DR

City  
HANSONState  
MAZip Code  
02341-1194FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679118**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOFFETT, MARY, , ,**

Mailing Address 2170 HEMPHILL DRIVE

City  
JENAState  
LAZip Code  
71342-4242FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

410.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681294**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

182.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2660 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678706**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOODY, JO, ANN, ,**

Mailing Address 507 POWER DR.

City  
DUNCANVILLEState  
TXZip Code  
75116-3721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679001**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOUNTEER, FAYE, , ,**

Mailing Address 9985N 5320 W

City  
HIGHLANDState  
UTZip Code  
84003-3501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

529.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678750**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

94.34



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2661 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUIR, JEFF, , ,**

Mailing Address 5125 MARBURY CIRCLE NW

City  
ATLANTAState  
GAZip Code  
30327-4961FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FULCRUM EQUITY PARTNERSOccupation (for Individual)  
BUSINESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1980.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680914**

Amount of Each Receipt this Period

990.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MYERS, JAMES, , ,**

Mailing Address 232 SHADY HILL DR

City  
RICHARDSONState  
TXZip Code  
75080-2035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680042**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, FRED, E., MR.,**Mailing Address 900 TAMiami TRL S  
APT 534City  
VENICEState  
FLZip Code  
34285-3627FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678431**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1119.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2662 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, FRED, E., MR.,**Mailing Address 900 TAMIAMI TRL S  
APT 534City  
VENICEState  
FLZip Code  
34285-3627FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679288**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, KAY, , ,**

Mailing Address 4518. 7TH ST

City  
LUBBOCKState  
TXZip Code  
79416-4713FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678375**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, PAUL, , ,**

Mailing Address 6803 NORTH 68TH PLAZA

City  
OMAHAState  
NEZip Code  
68152-2177FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678652**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2663 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, PAUL, , ,**

Mailing Address 6803 NORTH 68TH PLAZA

City  
OMAHAState  
NEZip Code  
68152-2177FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679617

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEWCOMB, JULIE, , ,**

Mailing Address 11986 NORTH 83RD PLACE

City  
SCOTTSDALEState  
AZZip Code  
85260-5682FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SALES AND MARKETING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680443

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NICHOLS, DORN, , ,**

Mailing Address 66101 US 33

City  
GOSHENState  
INZip Code  
46526-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680068

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

188.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2664 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NIEMANN, NANCY, , ,**

Mailing Address 18 DOGWOOD RD.

City  
MORRIS PLAINSState  
NJZip Code  
07950-1919FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

853.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680257**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIENKE, STEVE, , ,**

Mailing Address 1374 N RIDGE RD

City  
PECKState  
KSZip Code  
67120-9039FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680384**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NOTTINGHAM, MARGARETE, , ,**

Mailing Address PO BOX 236

City  
CARTERState  
MTZip Code  
59420-0236FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681191**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2665 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOYES, RITA, S., MRS.,**

Mailing Address 4070 FOUNDERS CLUB DR.

City  
SARASOTAState  
FLZip Code  
34240-1441FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.60

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680486**

Amount of Each Receipt this Period

8.09

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSEN, RORY, , ,**

Mailing Address 11007 CRANBROOK ROAD

City  
HOUSTONState  
TXZip Code  
77042-1327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.30

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680413**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLSON, PHILIP, , ,**

Mailing Address 2205 ENGLEWOOD AVE

City  
YAKIMAState  
WAZip Code  
98902-1647FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

378.04

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678371**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2666 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLSON, SHARON, , ,

Mailing Address 1239 O'LEARY DRIVE

City  
JOLIETState  
ILZip Code  
60431-8954FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679289

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLSON, SHARON, , ,

Mailing Address 1239 O'LEARY DRIVE

City  
JOLIETState  
ILZip Code  
60431-8954FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679291

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLSON, SHARON, , ,

Mailing Address 1239 O'LEARY DRIVE

City  
JOLIETState  
ILZip Code  
60431-8954FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679294

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

45.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2667 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLSON, SHARON, , ,**

Mailing Address 1239 O'LEARY DRIVE

City  
JOLIETState  
ILZip Code  
60431-8954FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.21

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679301**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, SHARON, , ,**

Mailing Address 1239 O'LEARY DRIVE

City  
JOLIETState  
ILZip Code  
60431-8954FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.21

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679307**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ORYALL, CORA, , MS.,**

Mailing Address 7414 PALM CT

City  
PLEASANTONState  
CAZip Code  
94588-4851FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.67

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679063**

Amount of Each Receipt this Period

34.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2668 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678593

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678604

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678605

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.37



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2669 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27678606**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27678608**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27678613**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

48.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2670 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OTTO, DAVID, , ,**

Mailing Address 85 KARL RD

City  
MOSES LAKEState  
WAZip Code  
98837-9458FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679938**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OTTO, WAYNE, , MR.,**

Mailing Address 1232 LITTLE BEAR LOOP

City  
LEWIS CENTERState  
OHZip Code  
43035-1100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680741**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAGEL, ANITA, , ,**

Mailing Address 100 NORTH OLIVE STREET

City  
SAINT ELMOState  
ILZip Code  
62458-1443FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PAGEL FUNERAL HOMESOccupation (for Individual)  
FUNERAL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

335.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679848**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

224.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2671 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALMER, DARREL, , ,**

Mailing Address 22752 SERENITY LANE

City  
NISSWAState  
MNZip Code  
56468-7518FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENERGY MANAGEMENT RESOURCESOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680827**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAPPAS, JAMES, , ,**

Mailing Address 6202 APPIAN WAY

City  
RIVERSIDEState  
CAZip Code  
92506-4555FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679670**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAULL, RANDALL, S., MR.,**

Mailing Address 13407 GRENOBLE DR.

City  
ROCKVILLEState  
MDZip Code  
20853-2834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NVR INC.Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679134**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

243.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2672 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PERKINS-LEONE, PATRICIA, , MRS.,**

Mailing Address 2 QUEENS COURT

City  
ATHERTONState  
CAZip Code  
94027-5409FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679677

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRY, HUGH, D., MR.,**

Mailing Address 5205 FREDERICKSBURG WAY E

City  
BRENTWOODState  
TNZip Code  
37027-4770FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.48

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679401

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERRY JONES, JUDY, P., MS.,**Mailing Address 2950 MOUNT WILKINSON PKWY SE  
UNIT 816City  
ATLANTAState  
GAZip Code  
30339-3662FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

647.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680926

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1112.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2673 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETERSON, SHARON, , ,**

Mailing Address 3410 LONDON CT DR

City  
COLUMBUSState  
OHZip Code  
43221-1166FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.70

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679235**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETRILENA, JAMES, , ,**

Mailing Address 19 HIGHLAND DR.

City  
MC KEES ROCKSState  
PAZip Code  
15136-1731FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CARPENTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679522**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680237**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

99.22

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2674 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680287

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680652

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PINCHES, CYNTHIA, , ,**

Mailing Address 16 BUNKER HILL ROAD

City  
NEW BRITAINState  
CTZip Code  
06053-2206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1376.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680420

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

16.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2675 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PLENDERLEITH, GRACE, , ,**

Mailing Address 111 FALCON RIDGE DRIVE

City  
IRWINState  
PAZip Code  
15642-3094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679233**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PLENDERLEITH, GRACE, , ,**

Mailing Address 111 FALCON RIDGE DRIVE

City  
IRWINState  
PAZip Code  
15642-3094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679238**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PLENDERLEITH, GRACE, , ,**

Mailing Address 111 FALCON RIDGE DRIVE

City  
IRWINState  
PAZip Code  
15642-3094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679241**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

14.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2676 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PLENDERLEITH, GRACE, , ,**

Mailing Address 111 FALCON RIDGE DRIVE

City  
IRWINState  
PAZip Code  
15642-3094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.57

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679250**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PLENDERLEITH, GRACE, , ,**

Mailing Address 111 FALCON RIDGE DRIVE

City  
IRWINState  
PAZip Code  
15642-3094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.57

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679835**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PLENDERLEITH, GRACE, , ,**

Mailing Address 111 FALCON RIDGE DRIVE

City  
IRWINState  
PAZip Code  
15642-3094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.57

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679846**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2677 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRINDLE, GLEN, , ,**

Mailing Address 942 DISCOVERY CIR NE

City  
ISSAQUAHState  
WAZip Code  
98029-6203FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SPUOccupation (for Individual)  
FACILITY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678175**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRINDLE, GLEN, , ,**

Mailing Address 942 DISCOVERY CIR NE

City  
ISSAQUAHState  
WAZip Code  
98029-6203FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SPUOccupation (for Individual)  
FACILITY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678184**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PURDON, THOMAS, F., MR.,**

Mailing Address 8550 W CONTINENTAL DR

City  
PEORIAState  
AZZip Code  
85382-2702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679353**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2678 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. QUINLIVAN, SANDRA, J., MRS.,**

Mailing Address 10015 S HAMILTON AVE

City  
CHICAGOState  
ILZip Code  
60643-2041FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HEALTH CARE SERVICE CORP.Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679156**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RANDALL, HELEN, , ,**

Mailing Address 13249 SW 190TH ST

City  
ROSE HILLState  
KSZip Code  
67133-8519FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681154**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RANDALL, HELEN, , ,**

Mailing Address 13249 SW 190TH ST

City  
ROSE HILLState  
KSZip Code  
67133-8519FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

442.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681157**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

203.15

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2679 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RANKIN, DEBRA, CONNOR, MS.,**

Mailing Address 542 MOUNT OLIVE CHURCH RD.

City  
TIFTON

State  
GA

Zip Code  
31794-2628

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.25

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27678788**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RANSOM, JAMES, H., DR.,**

Mailing Address 319 WOODLAND RD.

City  
SEWICKLEY

State  
PA

Zip Code  
15143-1048

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.27

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680359**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REEDER, KENT, , ,**

Mailing Address 3899 ORCHARD LN

City  
BEULAH

State  
MI

Zip Code  
49617-9675

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REEDERREN-O

Occupation (for Individual)  
SELF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.06

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27679381**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

244.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2680 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REIZOVIC, ROY, , ,**

Mailing Address 8520 SUTTERFIELD DRIVE

City  
COLORADO SPRINGSState  
COZip Code  
80920-6204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680867

Amount of Each Receipt this Period

4.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIBA, BRADLEY, A., MR.,**

Mailing Address 513 4TH AVE. NE

City  
SARTELLState  
MNZip Code  
56377-2123FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27681019

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIDDICK, MAX, F., MR.,**

Mailing Address 3618 TIGER POINT BLVD

City  
GULF BREEZEState  
FLZip Code  
32563-3443FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680732

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

123.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2681 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678992**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680192**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RINDLAUB, SARAH, S., MS.,**Mailing Address 8441 SE 68TH ST.  
#217City  
MERCER ISLANDState  
WAZip Code  
98040-5235FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

406.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678286**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.45

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2682 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, HAZEL, , ,**

Mailing Address 1333 LEE ROAD 312

City  
SMITHS STATIONState  
ALZip Code  
36877-3195FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680314**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681206**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROLINSON, FRANCIS, , ,**

Mailing Address 26 LYNDEBORO STREET

City  
CHARLESTOWNState  
MAZip Code  
02129-1648FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679377**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

126.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2683 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680130**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680147**

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680461**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2684 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680515

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679765

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUGGIERI, THOMAS, , MR.,**

Mailing Address 115 HAWTHORNE LN

City  
PHOENIXVILLEState  
PAZip Code  
19460-2731FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679391

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.04



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2685 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVER

State  
NJ

Zip Code  
08882-1908

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680991**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINE

State  
CA

Zip Code  
92604-2216

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.83

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680100**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RYDZESKI, TOM, , ,**

Mailing Address 22562 MARYLHURST CT

City  
LAKE FOREST

State  
CA

Zip Code  
92630-5033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

302.05

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27679739**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

53.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2686 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RYERSE, TIM, , ,**

Mailing Address 11609 NE 185TH ST

City  
BATTLE GROUNDState  
WAZip Code  
98604-7374FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680508**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SACHNOFF, BRUCE, , ,**

Mailing Address 126 FIELD CLUB ROAD

City  
PITTSBURGHState  
PAZip Code  
15238-2238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

694.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678455**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SALMOND, KENT, , ,**

Mailing Address 808 LILAC WAY

City  
LOS GATOSState  
CAZip Code  
95032-3527FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678844**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

240.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2687 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAMS, SANDY, , ,**

Mailing Address P O BOX 466

City  
TUPELOState  
MSZip Code  
38802-0466FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678574**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAVAGE, SYLVIA, , ,**Mailing Address 3100 UTICA SELLERSBURG RD  
APT 201City  
JEFFERSONVILLEState  
INZip Code  
47130-0031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681049**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHAAB, JANICE, , ,**

Mailing Address 560 WOODINGTON DRIVE

City  
LANCASTERState  
CAZip Code  
93535-3808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

588.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679266**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2688 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHAAB, JANICE, , ,**

Mailing Address 560 WOODINGTON DRIVE

City  
LANCASTERState  
CAZip Code  
93535-3808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679267

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHAAB, JANICE, , ,**

Mailing Address 560 WOODINGTON DRIVE

City  
LANCASTERState  
CAZip Code  
93535-3808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679268

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHAAB, JANICE, , ,**

Mailing Address 560 WOODINGTON DRIVE

City  
LANCASTERState  
CAZip Code  
93535-3808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

588.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679280

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2689 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHAAB, JANICE, , ,**

Mailing Address 560 WOODINGTON DRIVE

City  
LANCASTERState  
CAZip Code  
93535-3808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679644**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHATTYN, JOHN, , MR.,**

Mailing Address 129 CROCKETT DR.

City  
KERRVILLEState  
TXZip Code  
78028-8114FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678836**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLESINGER, KATHIE, , ,**

Mailing Address 2840 EARLSWOOD ROAD

City  
MIDLOTHIANState  
VAZip Code  
23113-2207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679565**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

197.79

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2690 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHMIDT, BARBARA, , ,**Mailing Address 728 E PLEASANT ST  
APT 1610City  
MILWAUKEEState  
WIZip Code  
53202-4630FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ASCENSIONOccupation (for Individual)  
MEDICAL ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679423

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHMIDT, BARBARA, , ,**Mailing Address 728 E PLEASANT ST  
APT 1610City  
MILWAUKEEState  
WIZip Code  
53202-4630FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ASCENSIONOccupation (for Individual)  
MEDICAL ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679437

Amount of Each Receipt this Period

330.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHRAM, CHARLES, , ,**

Mailing Address 14816 WEST HURON DRIVE

City  
SUN CITY WESTState  
AZZip Code  
85375-5988FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

844.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679082

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

391.03

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2691 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHRAM, CHARLES, , ,**

Mailing Address 14816 WEST HURON DRIVE

City  
SUN CITY WEST

State  
AZ

Zip Code  
85375-5988

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27681245**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHRANTHAYWARD, LAURA, , ,**

Mailing Address 545 MATAGUAL

City  
VISTA

State  
CA

Zip Code  
92081-6608

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ADP

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27678457**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHRIBER, C P, , ,**

Mailing Address P.O. BOX 70

City  
MCNEIL

State  
TX

Zip Code  
78651-0070

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FILM FLEET, LLC

Occupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

**Transaction ID : SA11A.27678556**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

72.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2692 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHROEDER, STEPHEN, , ,**

Mailing Address 20722 348TH STREET

City  
TAYLORS FALLSState  
MNZip Code  
55084-2848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678329**

Amount of Each Receipt this Period

32.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHROEDER, STEPHEN, , ,**

Mailing Address 20722 348TH STREET

City  
TAYLORS FALLSState  
MNZip Code  
55084-2848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678340**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678674**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

42.90



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2693 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678676

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678678

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678679

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2694 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678683**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SERBIA, VICTORIA, C., ,**

Mailing Address 4304 HORACE DR. NW

City  
HUNTSVILLEState  
ALZip Code  
35816-3518FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681160**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHAFFER, JOHN, , ,**

Mailing Address 267 NEWPORT NEWS AVE

City  
HAMPTONState  
VAZip Code  
23669-4146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679155**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2695 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHECHTMAN, ARLEAH, , ,**

Mailing Address 1381 CREEKSIDE CT.

City  
KALISPELLState  
MTZip Code  
59901-9024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
THERAPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678975

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHECHTMAN, ARLEAH, , ,**

Mailing Address 1381 CREEKSIDE CT.

City  
KALISPELLState  
MTZip Code  
59901-9024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
THERAPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678980

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHEHADEH, ELIAS, , ,**

Mailing Address 149 LEFFERTS RD

City  
YONKERSState  
NYZip Code  
10705-1638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678468

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.47

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2696 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHERROD, CLIFFORD, , ,**

Mailing Address 28900 SOUTH SONCY ROAD

City  
CANYON

State  
TX

Zip Code  
79015-6420

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.00

Date of Receipt

**02 / 12 / 2025**

**Transaction ID : SA11A.27678162**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHERROD, CLIFFORD, , ,**

Mailing Address 28900 SOUTH SONCY ROAD

City  
CANYON

State  
TX

Zip Code  
79015-6420

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.00

Date of Receipt

**02 / 12 / 2025**

**Transaction ID : SA11A.27678165**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACH

State  
FL

Zip Code  
32174-9213

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

**02 / 12 / 2025**

**Transaction ID : SA11A.27678420**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

117.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2697 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOEMAKER, ROBERT, , ,**

Mailing Address 925 ROSCOMMON DRIVE

City  
BRYN MAWRState  
PAZip Code  
19010-1842FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PHILMONT GUIDANCEOccupation (for Individual)  
PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679256**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SICOLA, CHARLES, , ,**

Mailing Address 5532 JENNIE ST

City  
ZEPHYRHILLSState  
FLZip Code  
33542-6829FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FRANCHISE CONSULTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680970**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SILVEIRA, CHRIS, , ,**

Mailing Address 3 HILLBILLY LN, LOT A

City  
CRESCENT VALLEYState  
NVZip Code  
89821-8083FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678754**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2698 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINHA, RENUKA, , MR.,**

Mailing Address 14 BELLAVISTA CT

City  
EDISONState  
NJZip Code  
08820-4439FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680256**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, CHRIS, , ,**

Mailing Address 2082 WILLOW BEACH

City  
KEEGO HARBORState  
MIZip Code  
48320-1210FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.09

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678261**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, EILEEN, , ,**

Mailing Address 3340 FANNIE THOMPSON RD

City  
MONROEState  
GAZip Code  
30656-8512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678386**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

237.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2699 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, ELIZABETH, , ,**

Mailing Address 1709 INDIAN WELLS AVE

City  
OCALAState  
FLZip Code  
34472-8401FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.57

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681064**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, LINDA, NESTOR, ,**Mailing Address 700 PENN CENTER BLVD APT 403  
LAUREL VILLAGE APTS

City

PITTSBURGH

State

PA

Zip Code

15235-5916

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.59

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680979**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, MARY, L., ,**

Mailing Address 2939 QUENLEY ST

City

SAINT CHARLES

State

MO

Zip Code

63301-

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

324.91

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680857**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2700 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.30

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679131**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SNOWDEN, JAMES, , MR., III**

Mailing Address 4033 TAMWORTH RD

City  
FORT WORTHState  
TXZip Code  
76116-7337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1694.01

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679164**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLEANICOV, PAVEL, A., MR.,**

Mailing Address 711 MEADOW CREST DRIVE

City  
ROCKTONState  
ILZip Code  
61072-8000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.52

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679282**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.62



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2701 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678680**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679101**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPAETH, EDMUND, , ,**

Mailing Address 26536 LOVE LN

City  
RAMONAState  
CAZip Code  
92065-4822FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

499.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679153**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2702 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPAETH, EDMUND, , ,**

Mailing Address 26536 LOVE LN

City  
RAMONAState  
CAZip Code  
92065-4822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679446**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPALLONE, ARLENE, , ,**

Mailing Address 5925 BRAE BURN CIR

City  
VERO BEACHState  
FLZip Code  
32967-5277FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680422**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STALNAKER, BEN, , DR.,**

Mailing Address 10424 TAM O SHANTER RD

City  
PENSACOLAState  
FLZip Code  
32514-8305FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681003**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2703 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEIN, BERTRAM, , ,**

Mailing Address 6797 MANCHESTER RD.

City  
SOUTH BELOITState  
ILZip Code  
61080-9773FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680183**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678967**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678969**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

266.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2704 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678972**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678977**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678982**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

3.02

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2705 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678987**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678998**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOKES, PATSY, , ,**

Mailing Address 2092 GREY FOX LANE

City  
VIRGINIA BEACHState  
VAZip Code  
23456-5206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

479.59

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679790**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2706 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STOKES, PATSY, , ,**

Mailing Address 2092 GREY FOX LANE

City  
VIRGINIA BEACHState  
VAZip Code  
23456-5206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679868**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STONESIFER, FOSTER, A., MR.,**

Mailing Address 791 SELLS STATION RD

City  
LITTLESTOWNState  
PAZip Code  
17340-9434FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680640**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STONE, RODNEY, , ,**

Mailing Address 8530 VENICE BOULEVARD

City  
LOS ANGELESState  
CAZip Code  
90034-2549FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENVOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679700**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

459.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2707 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STREBECK, JULIA, , ,**

Mailing Address 5315 CR 922

City  
NEVADAState  
TXZip Code  
75173-6161FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.74

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678164**

Amount of Each Receipt this Period

72.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STUMPF, JOHN, , ,**

Mailing Address 2557 SOUTH AVENUE

City  
WAPPINGERS FALLSState  
NYZip Code  
12590-7710FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680332**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678508**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2708 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUTTON, G., SUE, ,**

Mailing Address 13722 LLANO LAKE COURT

City  
HOUSTONState  
TXZip Code  
77059-3306FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680562**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SWANSON, CLARA, , ,**

Mailing Address 10854 SUSIE LN.

City  
SANTEEState  
CAZip Code  
92071-5041FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679468**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAFFINDER, JANIECE, A., MS.,**

Mailing Address 3504 DRY BROOK CROSSING

City  
PFLUGERVILLEState  
TXZip Code  
78660-5581FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678369**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

233.20



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2709 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TALBOT, DOUGLAS, , ,**

Mailing Address 4548 SOUTH 785 EAST

City  
MILLCREEK

State  
UT

Zip Code  
84107-4128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.25

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680568**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TALBOT, DOUGLAS, , ,**

Mailing Address 4548 SOUTH 785 EAST

City  
MILLCREEK

State  
UT

Zip Code  
84107-4128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.25

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680569**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TALBOT, DOUGLAS, , ,**

Mailing Address 4548 SOUTH 785 EAST

City  
MILLCREEK

State  
UT

Zip Code  
84107-4128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

228.25

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27680572**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2710 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TALBOT, DOUGLAS, , ,**

Mailing Address 4548 SOUTH 785 EAST

City  
MILLCREEKState  
UTZip Code  
84107-4128FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680575

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TALBOT, DOUGLAS, , ,**

Mailing Address 4548 SOUTH 785 EAST

City  
MILLCREEKState  
UTZip Code  
84107-4128FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680577

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TALBOT, DOUGLAS, , ,**

Mailing Address 4548 SOUTH 785 EAST

City  
MILLCREEKState  
UTZip Code  
84107-4128FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

228.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27680581

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2711 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TALBOT, DOUGLAS, , ,**

Mailing Address 4548 SOUTH 785 EAST

City  
MILLCREEKState  
UTZip Code  
84107-4128FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680585**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THARP, ROBERT, , ,**

Mailing Address 2609 NW 40 ST.

City  
OKLAHOMA CITYState  
OKZip Code  
73112-3704FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679207**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMAS, LORITA, , ,**

Mailing Address 2000 WEST INTERNATIONAL AIRPORT RO

City  
ANCHORAGEState  
AKZip Code  
99502-1117FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ATP MEDICINE, LTDOccupation (for Individual)  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

296.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678811**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2712 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, BONNIE, , ,**

Mailing Address 115 HOLBROOK DR.

City  
HUNTSVILLEState  
ALZip Code  
35806-4084FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678724

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TODD, LESTER, , ,**

Mailing Address 1115 BLUERIDGE DR.

City  
CANYON LAKEState  
TXZip Code  
78133-4185FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STUDENT TRANSPORTATION OF AMERICAOccupation (for Individual)  
BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27678215

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TUKE, THOMAS, , ,**

Mailing Address 19 HAYFIELD WAY

City  
PITTSFORDState  
NYZip Code  
14534-4621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

446.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679270

Amount of Each Receipt this Period

1.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

61.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2713 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680999**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. UHLENKOTT, KATHRYN, L., MRS.,**

Mailing Address 1986 KELMSCOTT ST

City  
THE VILLAGESState  
FLZip Code  
32162-7052FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOSTON VISITING NURSES ASSOCIATIONOccupation (for Individual)  
RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678656**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. UNRUH, AUDREY, , MS.,**

Mailing Address 1557 BASIL LEAF ST.

City  
MANTECAState  
CAZip Code  
95336-8393FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27679825**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2714 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678453**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VASEK, GARY, R., MR.,**

Mailing Address 6387 ASHCROFT DR.

City  
COLORADO SPRINGSState  
COZip Code  
80918-3241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.85

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678758**

Amount of Each Receipt this Period

18.74

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAWTER, STEVE, , ,**

Mailing Address 1701 CATALINA AVE

City  
SEAL BEACHState  
CAZip Code  
90740-5710FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1364.15

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680445**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

157.84

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2715 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VENNUM, PAULINE, , ,**

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDOState  
FLZip Code  
32801-4360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.43

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681128**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VERPLANCK, JAMES, S., MR.,**

Mailing Address 3525 BRIDGEFIELD DR.

City  
LAKELANDState  
FLZip Code  
33803-5912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680466**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VILLABONA, MARTHA, , ,**

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMIState  
FLZip Code  
33143-8048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680949**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

68.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2716 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VLIET, KIRSTEN, , ,**

Mailing Address 3300 BEE CAVE RD

City  
WEST LAKE HILLSState  
TXZip Code  
78746-6600FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BICOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680662**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678548**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680189**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.47



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2717 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WADHAM, THOMAS, A., ,**

Mailing Address 600 FOREST GROVE AVE

City  
DAYTONState  
OHZip Code  
45406-4434FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.41

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679310**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALDRUP, JAMES, , , III**

Mailing Address 2423 WINTHROP RD

City  
TALLAHASSEEState  
FLZip Code  
32308-0524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STREAM ENERGY, INC.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1215.13

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679916**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALDRUP, JAMES, , , III**

Mailing Address 2423 WINTHROP RD

City  
TALLAHASSEEState  
FLZip Code  
32308-0524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STREAM ENERGY, INC.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1215.13

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680543**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2718 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALL, CHARLES, , ,**

Mailing Address 32 CORN TASSEL CIRCLE

City  
BLUFFTONState  
SCZip Code  
29910-7717FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679744

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALLING, FRANCES, J., ,**

Mailing Address 14604 E 37TH ST S

City  
INDEPENDENCEState  
MOZip Code  
64055-3436FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679181

Amount of Each Receipt this Period

21.34

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALLS, DIANE JANE, , ,**

Mailing Address 1882 VISTA HILLS DR.

City  
NAVASOTAState  
TXZip Code  
77868-6966FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.27679257

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

109.83

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2719 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALLS, DIANE JANE, , ,**

Mailing Address 1882 VISTA HILLS DR.

City  
NAVASOTA

State  
TX

Zip Code  
77868-6966

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.50

Date of Receipt

**02** / **12** / **2025**

**Transaction ID : SA11A.27679265**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALLS, DIANE JANE, , ,**

Mailing Address 1882 VISTA HILLS DR.

City  
NAVASOTA

State  
TX

Zip Code  
77868-6966

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.50

Date of Receipt

**02** / **12** / **2025**

**Transaction ID : SA11A.27679777**

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALLS, DIANE JANE, , ,**

Mailing Address 1882 VISTA HILLS DR.

City  
NAVASOTA

State  
TX

Zip Code  
77868-6966

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

697.50

Date of Receipt

**02** / **12** / **2025**

**Transaction ID : SA11A.27679779**

Amount of Each Receipt this Period

1.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2720 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WARD, CAROL, , MS.,**

Mailing Address 14300 JACKSON RD

City  
SLOUGHHOUSEState  
CAZip Code  
95683-9712FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.88

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679990**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEATHERLY, CINDI, , ,**

Mailing Address 4690 MEADOW SPRINGS DRIVE

City  
WATKINSVILLEState  
GAZip Code  
30677-4642FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.16

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679517**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELLS, JOSEPH, , MR., JR.**Mailing Address 151 FAIRVIEW DR.  
APT 358City  
LITITZState  
PAZip Code  
17543-8164FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680856**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2721 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELLS, JOSEPH, , MR., JR.**Mailing Address 151 FAIRVIEW DR.  
APT 358City  
LITITZState  
PAZip Code  
17543-8164FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680931**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEST, THERESA, , ,**

Mailing Address 148 MAPLE CV

City

ONALASKA

State

TX

Zip Code

77360-7016

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27681218**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHEELER, STEVEN, R., MR.,**

Mailing Address 21631 E 101ST ST S

City

BROKEN ARROW

State

OK

Zip Code

74014-3645

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.87

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27680560**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2722 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WIDJAJA, RATNA, , ,**

Mailing Address 1550 FRONTERA WAY APT 210

City  
MILLBRAEState  
CAZip Code  
94030-2804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678355**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, BETTY, , ,**

Mailing Address 311 HARPER LOOP

City  
GRANTS PASSState  
ORZip Code  
97527-5339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.52

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678246**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIS, MIKE, , ,**

Mailing Address 12 EATON SQUARE

City  
HOUSTONState  
TXZip Code  
77027-3109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.02

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678718**

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

640.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2723 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, CHEQUITA, , ,**

Mailing Address 222BENSON ROAD

City  
GARDENDALEState  
ALZip Code  
35071-3851FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.88

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679514**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, DIANE, J., ,**

Mailing Address 47 CR 1220

City  
PITTSBURGState  
TXZip Code  
75686-6192FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27678506**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, JEAN, , ,**

Mailing Address 5644 ARAL DRIVE

City  
LAKELANDState  
FLZip Code  
33805-9615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.62

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680835**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.54

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2724 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, MARGARET, A., MS.,**

Mailing Address 2005 ARTHUR LANE

City  
AUSTIN

State  
TX

Zip Code  
78704-3235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IC2, UT AUSTIN

Occupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.74

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27678596**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, MARGARET, A., MS.,**

Mailing Address 2005 ARTHUR LANE

City  
AUSTIN

State  
TX

Zip Code  
78704-3235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IC2, UT AUSTIN

Occupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.74

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27681217**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WISMER, ANN, , ,**

Mailing Address 11 WATERFORD OAKS LANE

City  
KEMAH

State  
TX

Zip Code  
77565-2923

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WISMER DISTRIBUTING CO

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1026.70

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025

**Transaction ID : SA11A.27678307**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

137.41



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2725 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, CAROLYN, , ,**

Mailing Address 30 LISA AVE

City  
POPLAR BLUFFState  
MOZip Code  
63901-9094FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678644**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, MARY, H., MR.,**

Mailing Address 300 BELL MEADE DR.

City  
EADSState  
TNZip Code  
38028-3524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678395**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11A.27678867**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2726 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, RICHARD, L., ,**

Mailing Address 14416 BEACH RD.

City  
CHESTERFIELDState  
VAZip Code  
23838-2307FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.32

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27680275**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679682**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YATES, SYLVIA, , ,**

Mailing Address 4107 N ALABAMA ST

City  
LOXLEYState  
ALZip Code  
36551-4533FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.60

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679717**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2727 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNG, PATRICIA, , ,**

Mailing Address 9940 PREMIERE VIEW CIR

City  
HAGERSTOWNState  
MDZip Code  
21740-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.42

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679150**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YSURSA, GENEVIEVE, , ,**

Mailing Address 3628 E. WARM SORINGS

City  
BOISEState  
IDZip Code  
83716-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BISHOP KELLY HIGHOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.88

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681179**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZIMA, JEFF, G., ,**

Mailing Address P.O. BOX 88

City  
SIDNEYState  
IAZip Code  
51652-0088FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.50

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679778**

Amount of Each Receipt this Period

37.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2728 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZIMA, JEFF, G., ,**

Mailing Address P.O. BOX 88

City  
SIDNEYState  
IAZip Code  
51652-0088FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.50

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27679805**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZOLLER, JIM, , ,**

Mailing Address 120 NIATROSS CT

City  
RENOState  
NVZip Code  
89521-6345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.17

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2025**Transaction ID : SA11A.27681242**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11C.27682140**

Amount of Each Receipt this Period

93723.76

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.66

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2729 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABSMEIER, DEBRA, , ,**

Mailing Address 3349 ATEOOD DR

City  
LOVELAND

State  
CO

Zip Code  
80538-4964

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.44

Date of Receipt

02 / 13 / 2025

**Transaction ID : SA11A.27682212**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAM

State  
NY

Zip Code  
10803-1457

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.47

Date of Receipt

02 / 13 / 2025

**Transaction ID : SA11A.27683102**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAM

State  
NY

Zip Code  
10803-1457

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

599.47

Date of Receipt

02 / 13 / 2025

**Transaction ID : SA11A.27683494**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2730 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.47

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684068**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.47

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684082**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADKINS, MARY, , ,**

Mailing Address 416 SW 725TH RD

City  
CHILHOWEEState  
MOZip Code  
64733-9229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

796.61

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683723**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

24.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2731 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADLER, ROBERT, , ,**

Mailing Address 1445 MONACO PKWY

City  
DENVERState  
COZip Code  
80220-2844FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682543**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALDEN, ARTHUR, , ,**

Mailing Address 1381 HARBOURTOWNE DR.

City  
MYRTLE BEACHState  
SCZip Code  
29577-6374FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684413**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALEXANDER, ROBERT, , ,**

Mailing Address P.O. BOX 3524

City  
GRAND JUNCTIONState  
COZip Code  
81502-3524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FINANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683364**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

275.35

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2732 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLSTON, KENNETH, , ,**

Mailing Address 9450 RIVER VIEW RD.

City  
BROOMES ISLAND

State  
MD

Zip Code  
20615-3046

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27682858**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALLSTON, KENNETH, , ,**

Mailing Address 9450 RIVER VIEW RD.

City  
BROOMES ISLAND

State  
MD

Zip Code  
20615-3046

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27683813**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALL

State  
TX

Zip Code  
75087-2429

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.88

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27683166**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

298.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2733 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684361**

Amount of Each Receipt this Period

98.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684407**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDREWS, KELLI, , MS.,**

Mailing Address 6605 RIMROCK DRIVE

City  
IDAHO FALLSState  
IDZip Code  
83401-8001FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684530**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

138.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2734 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDREWS, WILLIAM, F., MR.,**

Mailing Address 1409 MORAN RD

City  
FRANKLINState  
TNZip Code  
37069-6301FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684767**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDROS, ANN, , ,**

Mailing Address P O BOX 3651

City  
CARMEL BY THE SEAState  
CAZip Code  
93921-3651FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683440**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. APEL, RONALD, H., MR.,**

Mailing Address 2345 2ND AVE NW

City  
CULLMANState  
ALZip Code  
35058-0470FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
APEL STEELOccupation (for Individual)  
STEEL FABRICATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683533**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2735 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAMERT, TOM, , ,**

Mailing Address BOX 336

City  
IONEState  
CAZip Code  
95640-0336FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1402.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684024

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BANNISTER, FRANK, , MR.,**

Mailing Address 420 NW 13

City  
OKLAHOMA CITYState  
OKZip Code  
73103-3735FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WESTERN OIL AND GASOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684508

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARILLARO, MARYANN, , MS.,**Mailing Address 130 WATER ST  
APT 1ACity  
NEW YORKState  
NYZip Code  
10005-1622FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

681.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684868

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

179.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2736 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARNES, PAUL, , ,**

Mailing Address 338 SUNSHINE WAY

City  
TURLOCKState  
CAZip Code  
95382-7373FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27685013**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARR, JONNA, , ,**

Mailing Address 4516 WEYBRIDGE DRIVE

City  
COLUMBIAState  
MOZip Code  
65203-6429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683861**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEAUDOIN, ROBERT, P., MR.,**

Mailing Address 2673 TORREY PINES DR

City  
BRENTWOODState  
CAZip Code  
94513-7089FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683926**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2737 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEGO, DAVID, A., ,**

Mailing Address P.O. BOX 501796

City  
INDIANAPOLISState  
INZip Code  
46250-6796FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EMSOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.90

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684477**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683594**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.06

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683596**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

67.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2738 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683598**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683602**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683603**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2739 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683610

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683626

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BENZEL, LIN, , ,**

Mailing Address 980 E SADDLEHORN RD

City  
SEDONAState  
AZZip Code  
86351-7421FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684304

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2740 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERG, EDWARD, , ,**

Mailing Address 3201 NE 183 STREET

City  
NORTH MIAMI BEACHState  
FLZip Code  
33160-2486FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HUDSONVILLEOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683882**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERRYHILL, LUCIE, B., ,**

Mailing Address 2225 OAKCLIFF DR.

City  
BATON ROUGEState  
LAZip Code  
70810-1861FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LUCIE BERRYHILLOccupation (for Individual)  
VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682280**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BESINGER, RICHARD, , ,**

Mailing Address 3700 SARATOGA AVENUE

City  
DOWNERS GROVEState  
ILZip Code  
60515-1443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOYOLA UNIVERSITY HEALTH SYSTEOccupation (for Individual)  
ACADEMIC PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682222**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

283.20



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2741 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682879

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682899

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682932

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

226.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2742 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BILLERO, EUGENE, L., ,**

Mailing Address 1843 E.SANDPOINTE LN

City  
VERO BEACHState  
FLZip Code  
32963-2738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BILLERO &BILLEROOccupation (for Individual)  
CEO/BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683311**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BIVENS, NANCY, , ,**

Mailing Address 2824 WISCONSIN AVE

City  
DAVENPORTState  
IAZip Code  
52806-6797FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.13

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682733**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BIVENS, NANCY, , ,**

Mailing Address 2824 WISCONSIN AVE

City  
DAVENPORTState  
IAZip Code  
52806-6797FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

331.13

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683705**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

322.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2743 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACK, LARRY, , ,**

Mailing Address 259 WHITE HERON DR.

City  
GEORGETOWNState  
TXZip Code  
78628-7272FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682782

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLAHA, RENE, , ,**

Mailing Address 2972 DIXON RD SW

City  
PATASKALAState  
OHZip Code  
43062-9602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL INTEGRATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684723

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLOMELEY, STEVE, , ,**

Mailing Address 2409 COLE STREET

City  
ORLANDOState  
FLZip Code  
32803-2149FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JMHC, INC.Occupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.48

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683569

Amount of Each Receipt this Period

145.74

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

260.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2744 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLOSSMAN, ALFRED, R., MR., JR.**

Mailing Address 16 BLOSSMAN LN.

City  
COVINGTONState  
LAZip Code  
70433-4707FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684908**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOBZIEN, ANN, , ,**

Mailing Address 52 RAVEN DRIVE

City  
ROCKY POINTState  
NCZip Code  
28457-9440FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.89

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682423**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOECKMANN, DAVID, , ,**

Mailing Address 1964 HWY 334

City  
FORREST CITYState  
ARZip Code  
72335-7950FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
USACEOccupation (for Individual)  
EQUIPMENT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684369**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2745 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOHANAN, MARK, , ,**

Mailing Address 219 E HOUSTON ST SUITE 275

City  
SAN ANTONIOState  
TXZip Code  
78205-1855FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOHANANS LTDOccupation (for Individual)  
RESTAURANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683252**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683848**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOULINEAU, EDWARD, C., MR.,**

Mailing Address 100 CIRCLE DR

City  
STATESBOROState  
GAZip Code  
30461-0578FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684550**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2746 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOULINEAU, EDWARD, C., MR.,**

Mailing Address 100 CIRCLE DR

City  
STATESBOROState  
GAZip Code  
30461-0578FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684569**

Amount of Each Receipt this Period

25.28

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMASState  
ORZip Code  
97015-8629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683260**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYER, RICHARD, P., DR.,**

Mailing Address 9303 HAVENBROOKE WAY

City  
KNOXVILLEState  
TNZip Code  
37922-4269FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NEUROSURGICAL ASSOCIATES, PCOccupation (for Individual)  
NEUROSURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684465**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2747 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYNTON, LINDA, A., ,**

Mailing Address 15877 FOUR CORNER RD

City  
PRAIRIE GROVEState  
ARZip Code  
72753-9244FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.69

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682398**

Amount of Each Receipt this Period

32.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BREWSTER, SHARON, , ,**

Mailing Address 806 MONTGOMERY ST.

City  
ALEXANDRIAState  
VAZip Code  
22314-1968FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682158**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BREWSTER, SHARON, , ,**

Mailing Address 806 MONTGOMERY ST.

City  
ALEXANDRIAState  
VAZip Code  
22314-1968FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684513**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2748 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRICKING, ANGELA, , ,**

Mailing Address 5470 LEUMAS RD.

City  
CINCINNATIState  
OHZip Code  
45239-7621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.80

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684146**

Amount of Each Receipt this Period

90.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRITTON, LINWOOD, , ,**

Mailing Address 2000 TRIMARAN PL

City  
WILMINGTONState  
NCZip Code  
28405-5210FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.30

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683053**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684605**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

176.70



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2749 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684880

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684882

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684883

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2750 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684884**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684886**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684887**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2751 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, ROGER, D., ,**

Mailing Address 4609 MARBELLA CIR

City  
FORT WORTHState  
TXZip Code  
76126-1927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

631.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682835**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRUMBAUGH, PHILIP, C., MR.,**

Mailing Address 108 PHILIP DR

City  
WEST MILTONState  
OHZip Code  
45383-1330FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684389**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURGERT, JANEAL, , ,**

Mailing Address 5 N 1600 W

City  
WEST POINTState  
UTZip Code  
84015-8061FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

626.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684832**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2752 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURNS, MICHAEL, J., ,**

Mailing Address 7287 HORIZON DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683353**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUSTARD, ANN, , ,**

Mailing Address 4512 GREENVIEW RD.

City  
TRENT WOODSState  
NCZip Code  
28562-7634FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682282**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAPLIN, DAVID, J., ,**

Mailing Address 124 WATER TURKEY CT

City  
DAYTONA BEACHState  
FLZip Code  
32119-8710FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684265**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

103.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2753 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARMICHAEL, JEFFREY, , ,**

Mailing Address 530 AVE DE LA CONSTITUCION

City  
SAN JUANState  
PRZip Code  
00901-2304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TOWER MANAGEMENT GROUP LLCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683215**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARNES, CALLAND, , ,**

Mailing Address 11078 SAFFOLD WAY

City  
RESTONState  
VAZip Code  
20190-3812FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683944**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683315**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10070.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2754 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683447**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARSTENSEN, DENNIS, , ,**

Mailing Address 1107 PERSHING BLVD

City  
CLINTONState  
IAZip Code  
52732-5207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.12

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684903**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CASPERSON, CAROLINA, , MS.,**

Mailing Address 100 SAINT PAUL ST, STE 700

City  
DENVERState  
COZip Code  
80206-5143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MUSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.18

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684262**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2755 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CASSENTI, JEAN, , ,**

Mailing Address 29 ARNOLD DR

City  
TOLLANDState  
CTZip Code  
06084-2810FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683911**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANDRA, HAROLD, , ,**

Mailing Address 132 OLD LAKE ST

City  
WEST HARRISONState  
NYZip Code  
10604-1611FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684839**

Amount of Each Receipt this Period

21.78

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684842**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.22



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2756 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHAPMAN, BETTY, , ,**

Mailing Address 2705 HARTWOOD DRIVE

City  
FORT WORTHState  
TXZip Code  
76109-1234FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684484**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHARLTON, VINCENT, R., ,**

Mailing Address 104 CREEK POINT CT

City  
COLONIAL HEIGHTSState  
VAZip Code  
23834-2215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683782**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHARLTON, VINCENT, R., ,**

Mailing Address 104 CREEK POINT CT

City  
COLONIAL HEIGHTSState  
VAZip Code  
23834-2215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683795**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.21



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2757 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHASE, RICHARD, , ,**

Mailing Address 2370 YORK ROAD, SUITE C4

City  
JAMISONState  
PAZip Code  
18929-1031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CHASE & ASSOCIATES, INC.Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684809**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHINCHAR, MARK, J., MR.,**

Mailing Address 23256 MAYBELLE DR.

City  
WESTLAKEState  
OHZip Code  
44145-2821FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ST. BERNADETTE CHURCHOccupation (for Individual)  
MAINTENANCE SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.73

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682352**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHURCH, STEVE, , ,**

Mailing Address 711 MAPLE ST

City  
ALVAState  
OKZip Code  
73717-2743FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683001**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

187.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2758 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CICONETTI, VICTOR, R., DR.,**

Mailing Address 671 CYPRESS POINT DRIVE

City  
EGG HARBOR CITYState  
NJZip Code  
08215-5124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682587

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CITRON, DIANE, M., MRS.,**

Mailing Address 2620 ARIZONA AVE, APT 3

City  
SANTA MONICAState  
CAZip Code  
90404-1415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682983

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683446

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2759 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683448**

Amount of Each Receipt this Period

7.19

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARKSON, WALTER, , ,**

Mailing Address 2079 SUJA LANE

City  
COPPERAS COVEState  
TXZip Code  
76522-6121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683118**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLARKSON, WALTER, , ,**

Mailing Address 2079 SUJA LANE

City  
COPPERAS COVEState  
TXZip Code  
76522-6121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683174**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2760 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLARKSON, WALTER, , ,**

Mailing Address 2079 SUJA LANE

City  
COPPERAS COVEState  
TXZip Code  
76522-6121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683212**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLEMENTS, ASHLEY, , ,**

Mailing Address 3950 WHEELER ROAD

City  
BAY CITYState  
MIZip Code  
48706-1857FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CLEMENTS CONTRACTINGOccupation (for Individual)  
OFFICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682373**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLUM, JANET, , ,**

Mailing Address 227 GRIZZLY RD.

City  
ROYALState  
ARZip Code  
71968-9423FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684925**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

226.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2761 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONNOR, JOHN, , MR.,**

Mailing Address 6528 LONE TREE DR.

City  
LINCOLNState  
NEZip Code  
68512-2407FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

Transaction ID : SA11A.27683612

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONNOR, JOHN, , MR.,**

Mailing Address 6528 LONE TREE DR.

City  
LINCOLNState  
NEZip Code  
68512-2407FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

Transaction ID : SA11A.27683616

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONNOR, JOHN, , MR.,**

Mailing Address 6528 LONE TREE DR.

City  
LINCOLNState  
NEZip Code  
68512-2407FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

Transaction ID : SA11A.27683621

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

247.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2762 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COPPLE, CLAIRE, , ,**

Mailing Address 2324 BISMARCK AVE

City  
MANTECAState  
CAZip Code  
95337-7841FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682411

Amount of Each Receipt this Period

11.45

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CORDRAY, GLORIA, , ,**

Mailing Address 19 WISTERIA LANE

City  
TROYState  
MOZip Code  
63379-4789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682238

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORDRAY, GLORIA, , ,**

Mailing Address 19 WISTERIA LANE

City  
TROYState  
MOZip Code  
63379-4789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

748.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682242

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2763 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORDRAY, GLORIA, , ,**

Mailing Address 19 WISTERIA LANE

City  
TROYState  
MOZip Code  
63379-4789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682243

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CORDRAY, GLORIA, , ,**

Mailing Address 19 WISTERIA LANE

City  
TROYState  
MOZip Code  
63379-4789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682276

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORDRAY, GLORIA, , ,**

Mailing Address 19 WISTERIA LANE

City  
TROYState  
MOZip Code  
63379-4789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

748.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682283

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.67

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2764 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CORDRAY, GLORIA, , ,

Mailing Address 19 WISTERIA LANE

City  
TROYState  
MOZip Code  
63379-4789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682285

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CORTNER, DIANE, , ,

Mailing Address 4849 FLORIDA AVE NORTH

City

MINNEAPOLIS

State

MN

Zip Code

55428-4609

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683423

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COX, JUNE, , ,

Mailing Address 159 NTH 4TH AVE

City

FORSYTH

State

MT

Zip Code

59327-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

318.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683219

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

41.23



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2765 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COX, THOMAS, , ,**

Mailing Address 120 SOUTH DEE ROAD

City  
PARK RIDGEState  
ILZip Code  
60068-3720FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ACME MACHILL COOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684415**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIGO, JACQUELINE, L., MS.,**

Mailing Address 1049 SUMMIT DR

City  
MOUNT VERNONState  
OHZip Code  
43050-9576FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1371.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683010**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRANDALL, CURTIS, O., ,**

Mailing Address 2213 W STATE ROAD 32

City  
PEOAState  
UTZip Code  
84061-9703FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.13

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682846**

Amount of Each Receipt this Period

130.13

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

206.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2766 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CROSSLAND, CURT, , ,**

Mailing Address 3713 WEST 26TH

City  
JOPLINState  
MOZip Code  
64804-0137FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684687**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CROWDER, JIMMIE, K., MR.,**

Mailing Address 711 N. BRUNSWICK AVE.

City  
SOUTH HILLState  
VAZip Code  
23970-1515FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROWDER-HITE-CREWSOccupation (for Individual)  
FUNERAL DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.30

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682718**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CROWLEY, DONNA, , MS.,**

Mailing Address 8 YORK LEDGE DRIVE

City  
CUMBERLAND FORESIDState  
MEZip Code  
04110-1323FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.20

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683136**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

308.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2767 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURRY, ROBERT, J., ,**

Mailing Address 1205 ANDTE CIR.

City  
CLAREMOREState  
OKZip Code  
74017-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.13

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684042**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURTIN, DINO, ALLEN, MR.,**

Mailing Address 228 U ST

City  
RIO LINDAState  
CAZip Code  
95673-1337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1405.40

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684313**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.68

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684945**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2768 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.68

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684956**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAVIS, REBECCA, , ,**

Mailing Address 15805 20TH AVE CT. E

City  
TACOMAState  
WAZip Code  
98445-6011FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.82

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683369**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAVIS, REBECCA, , ,**

Mailing Address 15805 20TH AVE CT. E

City  
TACOMAState  
WAZip Code  
98445-6011FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.82

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683376**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

21.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2769 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAY, SHARON, , ,**

Mailing Address 85 CARTER DR.

City  
NORTH MONMOUTHState  
MEZip Code  
04265-6019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683033**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEAL, JERRY, , ,**

Mailing Address 2929 ONATE ROAD

City  
LAS CRUCESState  
NMZip Code  
88007-8117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682409**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEAL, JERRY, , ,**

Mailing Address 2929 ONATE ROAD

City  
LAS CRUCESState  
NMZip Code  
88007-8117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

343.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683925**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2770 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683029**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DELPRETE, NANCY, , ,**

Mailing Address 3932 FORT DONELSON DRIVE

City  
STOCKTONState  
CAZip Code  
95219-3215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.05

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683996**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DELUCA, TONI, L., MS.,**

Mailing Address 4684 E HEDGES AVE

City  
FRESNOState  
CAZip Code  
93703-4707FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SJC INCOccupation (for Individual)  
COMPTROLLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

302.65

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27685002**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2771 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DELUCA, TONI, L., MS.,**

Mailing Address 4684 E HEDGES AVE

City  
FRESNOState  
CAZip Code  
93703-4707FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SJC INCOccupation (for Individual)  
COMPTROLLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27685009

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DELZELL, ROBERT, , ,**

Mailing Address 1482 EAST VALLEY ROAD

City  
SANTA BARBARAState  
CAZip Code  
93108-1200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683296

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEPUY, GALE, , ,**

Mailing Address 13145 ST RT 26

City  
MARIETTAState  
OHZip Code  
45750-7714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682442

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2772 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEYARMAN, GERALDINE, M., ,**

Mailing Address 2543 GRADWOHL RD

City  
TOLEDOState  
OHZip Code  
43617-1808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.08

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682416**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DILORENZO, ESTHER, , ,**

Mailing Address 46309 CORDOBA DRIVE

City  
NOVIState  
MIZip Code  
48374-2435FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684181**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIMARCO, LAURA, , MRS.,**

Mailing Address 18800 BREWSTER RD

City  
CHAGRIN FALLSState  
OHZip Code  
44023-4904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.44

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682794**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.88



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2773 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOANE, JIM, P., MR.,**

Mailing Address 3460 MINGLEWOOD DR.

City  
BEAUMONTState  
TXZip Code  
77703-2736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682865**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOANE, JIM, P., MR.,**

Mailing Address 3460 MINGLEWOOD DR.

City  
BEAUMONTState  
TXZip Code  
77703-2736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684319**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOEBLER, JAMES, C., MR.,**

Mailing Address 5211 PATRIOTS COLONY DRIVE

City  
WILLIAMSBURGState  
VAZip Code  
23188-1392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.03

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684187**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

201.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2774 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOEBLER, JAMES, C., MR.,**

Mailing Address 5211 PATRIOTS COLONY DRIVE

City  
WILLIAMSBURGState  
VAZip Code  
23188-1392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.03

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684194**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOKKEN, KENNETH, , ,**

Mailing Address 12513 44TH DRIVE SOUTHEAST

City  
EVERETTState  
WAZip Code  
98208-9003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.42

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683267**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DONAT, NICOLETTA, , ,**Mailing Address 1841 CENTRAL PARK AVE  
APT 1GCity  
YONKERSState  
NYZip Code  
10710-2946FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

621.13

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684967**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2775 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DONOVAN, ANNE, , ,**

Mailing Address 4 WEDGE LANE

City  
SELDENState  
NYZip Code  
11784-3309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682550

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DONOVAN, ANNE, , ,**

Mailing Address 4 WEDGE LANE

City  
SELDENState  
NYZip Code  
11784-3309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682817

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOPSLAUF, BILLIE, G., MS.,**

Mailing Address 7198 JONES RD

City  
BRYANState  
TXZip Code  
77807-9780FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684576

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.62

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2776 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOVER, BRENDA, , ,**

Mailing Address 28656 DEER RUN ST

City  
MONTGOMERY

State  
TX

Zip Code  
77356-3990

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
DOVER INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

747.83

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27682327**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOWDY, JOHN, , MR., JR.**

Mailing Address 3706 N SHADYCREEK DR.

City  
ARLINGTON

State  
TX

Zip Code  
76013-1017

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27683874**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOWNING, GEORGE, , ,**

Mailing Address 1308 EAST JULIE DRIVE

City  
TEMPE

State  
AZ

Zip Code  
85283-3117

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.41

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27683771**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

92.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2777 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOWNING, GINN, , ,**

Mailing Address 18134 LAMSON ROAD

City  
CASTRO VALLEYState  
CAZip Code  
94546-2120FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
COMMERCIAL REAL ESTATE FINANC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682457**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNLEVY, PATRICIA, , ,**

Mailing Address 5121 BROWNSTONE DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-6028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682267**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUPUIS, DANIELLE, , MS.,**

Mailing Address 153 8TH ST

City  
WIND GAPState  
PAZip Code  
18091-1023FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CENTURY WIRE PRODUCTS CORP.Occupation (for Individual)  
OWNER/PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

380.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684625**

Amount of Each Receipt this Period

18.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

153.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2778 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684414**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EATON, DAN, , ,**

Mailing Address 216 OAK HEIGHTS DRIVE

City

OAKDALE

State

PA

Zip Code

15071-1138

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSTRUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683873**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City

TOWSON

State

MD

Zip Code

21204-4701

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683164**

Amount of Each Receipt this Period

11.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.45

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2779 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELKINS, EVA, P., MRS.,**Mailing Address 10375 WILSHIRE BLVD  
9GCity  
LOS ANGELESState  
CAZip Code  
90024-4750FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.25

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682999**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMBORGO, MARITESS, , ,**

Mailing Address 62 WATERFORD CIRCLE

City  
NACOGDOCHESState  
TXZip Code  
75965-8730FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.96

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682524**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENDO, YOI, , ,**

Mailing Address 1273 ALA NAPUNANI ST.

City  
HONOLULUState  
HIZip Code  
96818-1626FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

445.60

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684958**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2780 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENGLISH, SHERRY, , ,**

Mailing Address 15815 BOOTH CIR

City  
VOLANTE

State  
TX

Zip Code  
78641-6018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.30

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27682575**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EWING, DONNA, , MS.,**

Mailing Address 18106 REDBUD CIRCLE

City  
FOUNTAIN VALLEY

State  
CA

Zip Code  
92708-5753

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.61

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27683604**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EWING, DONNA, , MS.,**

Mailing Address 18106 REDBUD CIRCLE

City  
FOUNTAIN VALLEY

State  
CA

Zip Code  
92708-5753

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.61

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27684094**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

101.91



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2781 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FANIZZI, ANN, , ,**

Mailing Address 2505 MORGAN DRIVE

City  
CARMEL

State  
NY

Zip Code  
10512-2612

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.50

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27683437**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FARRILL, CRAIG, , MR.,**

Mailing Address 162 POLK ROAD 89

City  
MENA

State  
AR

Zip Code  
71953-8940

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VIZIV TECHNOLOGIES

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.61

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27682168**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FARRILL, CRAIG, , MR.,**

Mailing Address 162 POLK ROAD 89

City  
MENA

State  
AR

Zip Code  
71953-8940

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VIZIV TECHNOLOGIES

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

351.61

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27684294**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

170.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2782 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FEIGENBAUM, ROBERT, , MR.,**

Mailing Address 339 AVALON DRIVE

City  
SOUTH SAN FRANCISCOState  
CAZip Code  
94080-5604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COVENANT AVIATION SECURITYOccupation (for Individual)  
TRANSPORTATION SECURITY OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.40

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682504**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISCHER, DALE, A., MR.,**

Mailing Address 22562 CLAUDE CIR.

City  
LAKE FORESTState  
CAZip Code  
92630-4609FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ACE ENTERENEASOccupation (for Individual)  
ADMIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683697**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFFState  
AZZip Code  
86005-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

709.05

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684081**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

119.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2783 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORD, BEVERLY, , ,**

Mailing Address 4350 COVE ISLAND DRIVE NORTHEAST

City  
MARIETTAState  
GAZip Code  
30067-3614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684827

Amount of Each Receipt this Period

2.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FORT, EUGENE, , ,**

Mailing Address 1708 JOHNSON RD

City  
BURLINGTONState  
NCZip Code  
27217-8179FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684503

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANCOIS, JEAN, N., ,**

Mailing Address 39 NICHOLSON DR

City  
BROCKTONState  
MAZip Code  
02302-2249FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LSHOccupation (for Individual)  
NURSING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683262

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

116.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2784 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRANCOIS, JEAN, N., ,**

Mailing Address 39 NICHOLSON DR

City  
BROCKTONState  
MAZip Code  
02302-2249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LSHOccupation (for Individual)  
NURSING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683275**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682163**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRAPS, JOHN, , ,**

Mailing Address 3810 WYANDOTTE TRAIL

City  
INDIANAPOLISState  
INZip Code  
46240-3422FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684528**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2785 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRAPS, JOHN, , ,**

Mailing Address 3810 WYANDOTTE TRAIL

City  
INDIANAPOLISState  
INZip Code  
46240-3422FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684543**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FREDERICK, CAROL, , ,**

Mailing Address P.O. BOX 961

City  
EDGEWOODState  
NMZip Code  
87015-0961FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.16

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683840**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FREELAND, JOHN, , ,**

Mailing Address 17383 HAXBY LANE

City  
WESTFIELDState  
INZip Code  
46074-3352FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

311.87

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683712**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.93

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2786 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRITZ, STEPHEN, , ,**

Mailing Address 194 TREDWELL AVENUE

City  
SAINT JAMES

State  
NY

Zip Code  
11780-1806

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27682569**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FUNCHEON, JIM, , ,**

Mailing Address 508 CENTER ST

City  
HACKETTSTOWN

State  
NJ

Zip Code  
07840-1104

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.33

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27684382**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FUNCHEON, JIM, , ,**

Mailing Address 508 CENTER ST

City  
HACKETTSTOWN

State  
NJ

Zip Code  
07840-1104

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.33

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27684399**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

145.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2787 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683824

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682350

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682441

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

119.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2788 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682884

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GANO, JOHN, , ,**

Mailing Address P.O. BOX 6038

City  
TYLERState  
TXZip Code  
75711-6038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684435

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GENALDI, ALLEN, JAY, MR.,**

Mailing Address 32007 POWDERPUFF MIMOSA DR.

City  
SAN ANTONIOState  
FLZip Code  
33576-7352FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682419

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.13



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2789 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GENZER, FRANK, , MR., JR.**

Mailing Address 145 SAINT JUDE STREET

City  
BILOXIState  
MSZip Code  
39530-3602FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684322**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILLESPIE, MIKE, , ,**

Mailing Address 4834 FAIRLAWN DR.

City

LA CANADA FLINTRID

State

CA

Zip Code

91011-1702

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684097**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIRVIN, JOANN, , MRS.,**

Mailing Address 7110 CREEKSIDE DR.

City

LANSING

State

MI

Zip Code

48917-9618

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

775.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682539**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

335.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2790 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLASS, CALVIN, E., MR.,**

Mailing Address 414 LYNDHURST DR.

City  
SPRING CREEKState  
NVZip Code  
89815-5913FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.89

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683857

Amount of Each Receipt this Period

21.07

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682501

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLENN, SAMUEL, , , JR.**Mailing Address 5490 ARBOR BRANCH DR.  
APT 234City  
SHALLOTTEState  
NCZip Code  
28470-6111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.81

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684289

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

108.12

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2791 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLOVER, AVERIL, , ,**

Mailing Address **446 LANCASHIRE RUN**

City  
**SMITHFIELD**

State  
**NC**

Zip Code  
**27577-8029**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**650.53**

Date of Receipt

**02 / 13 / 2025**

**Transaction ID : SA11A.27683471**

Amount of Each Receipt this Period

**47.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOMBERG, GALINA, , ,**

Mailing Address **96 CARRICK CIR.**

City  
**HAYWARD**

State  
**CA**

Zip Code  
**94542-7912**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1414.06**

Date of Receipt

**02 / 13 / 2025**

**Transaction ID : SA11A.27682528**

Amount of Each Receipt this Period

**41.64**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOMBERG, GALINA, , ,**

Mailing Address **96 CARRICK CIR.**

City  
**HAYWARD**

State  
**CA**

Zip Code  
**94542-7912**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**1414.06**

Date of Receipt

**02 / 13 / 2025**

**Transaction ID : SA11A.27682570**

Amount of Each Receipt this Period

**52.05**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**140.69**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2792 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOMBERG, GALINA, , ,**

Mailing Address 96 CARRICK CIR.

City  
HAYWARDState  
CAZip Code  
94542-7912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1414.06

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684168**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOOD, BRENDA, , ,**

Mailing Address 1213 WARWICK DR.

City  
MIAMISBURGState  
OHZip Code  
45342-3250FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.55

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683183**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRABOVSKY, ILYA, , ,**

Mailing Address 3334 WALNUT CREEK DR.

City  
CARMELState  
INZip Code  
46032-9037FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
APEXOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684840**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.59

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2793 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOS

State  
CA

Zip Code  
94070-2416

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HCP

Occupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27683875**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRISSOM, LINDA, , ,**

Mailing Address 1598 LEISURE WORLD

City  
MESA

State  
AZ

Zip Code  
85206-2315

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AWRC

Occupation (for Individual)  
NURSE PRACTITIONER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.36

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27684440**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERY

State  
AL

Zip Code  
36117-7558

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

854.63

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27682245**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2794 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERYState  
ALZip Code  
36117-7558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.63

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682246**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERYState  
ALZip Code  
36117-7558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.63

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682251**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERYState  
ALZip Code  
36117-7558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

854.63

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682253**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2795 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAGLER, THOMAS, , ,**

Mailing Address 13229 S. W. 3RD LANE

City  
NEWBERRYState  
FLZip Code  
32669-5421FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683618**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMAKER, CHARLES, , ,**

Mailing Address 1518 CHESTNUT GROVE LANE

City  
KINGWOODState  
TXZip Code  
77345-1915FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683061**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMILTON, BILL, , ,**

Mailing Address 7713 KOLMAR AVE

City  
SKOKIEState  
ILZip Code  
60076-3654FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.82

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682346**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2796 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMILTON, BILL, , ,**

Mailing Address 7713 KOLMAR AVE

City  
SKOKIEState  
ILZip Code  
60076-3654FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683862

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMMONS, JOYCE, , ,**

Mailing Address 3525 NEW DELHI DR.

City  
WINSTON SALEMState  
NCZip Code  
27101-6211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682147

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMMONS, JOYCE, , ,**

Mailing Address 3525 NEW DELHI DR.

City  
WINSTON SALEMState  
NCZip Code  
27101-6211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

665.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682169

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

77.06



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2797 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMMONS, JOYCE, , ,**

Mailing Address 3525 NEW DELHI DR.

City  
WINSTON SALEMState  
NCZip Code  
27101-6211FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.27

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682381**

Amount of Each Receipt this Period

14.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAND, VICTORIA, , ,**

Mailing Address 83 RUFFLED FEATHERS

City  
LEMONTState  
ILZip Code  
60439-7754FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684345**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, ROBERT, , ,**

Mailing Address 4215 FAWN LN SE

City  
SMYRNAState  
GAZip Code  
30082-3948FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682747**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

501.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2798 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARVEY, ALAN, , ,**

Mailing Address 626 KESSLER LAKE

City  
DALLASState  
TXZip Code  
75208-3938FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682825

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARWARD, JAMES, , ,**

Mailing Address 322 NEW KENT PLACE

City  
CARYState  
NCZip Code  
27511-4584FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683545

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARWARD, JAMES, , ,**

Mailing Address 322 NEW KENT PLACE

City  
CARYState  
NCZip Code  
27511-4584FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

493.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683549

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

253.98

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2799 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARWARD, JAMES, , ,

Mailing Address 322 NEW KENT PLACE

City  
CARYState  
NCZip Code  
27511-4584FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683555

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HASH, SHIRLEY, , ,

Mailing Address 6038 ROYAL GATE PLACE

City

INDIANAPOLIS

State

IN

Zip Code

46237-9242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684468

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAYS, CHARLES, RAYMOND, MR.,

Mailing Address 3100 BROOKHILL DR.

City

BIRMINGHAM

State

AL

Zip Code

35242-3702

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684634

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

91.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2800 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEATHMAN, CHRISTINE, , ,**

Mailing Address 1119 SOUTH SAGE CREEK COURT

City  
HEBER CITYState  
UTZip Code  
84032-4169FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLYMED PLUSOccupation (for Individual)  
FORMULATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1144.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684551**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEBERT, PETER, , ,**

Mailing Address 3317 S HIGLEY RD SUITE 114-226

City  
GILBERTState  
AZZip Code  
85297-5436FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684295**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683469**

Amount of Each Receipt this Period

46.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2801 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEDEBY, RICKARD, , MR.,**

Mailing Address 14251 SOUTH 12TH PLACE

City  
PHOENIXState  
AZZip Code  
85048-4404FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERTEC INTERNATIONALOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683923

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HELLER, KATHERINE, , ,**

Mailing Address 4652 OAKWOOD LN

City  
NAZARETHState  
PAZip Code  
18064-8533FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682322

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HELLER, KATHERINE, , ,**

Mailing Address 4652 OAKWOOD LN

City  
NAZARETHState  
PAZip Code  
18064-8533FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684720

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

134.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2802 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENDERSON, MARGARET, , ,**

Mailing Address 10333 ARVIN HILL RD

City  
AUBREYState  
TXZip Code  
76227-6848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682149**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERETH, JACK, R., MR.,**

Mailing Address 4066 EARNEY RD

City  
WOODSTOCKState  
GAZip Code  
30188-5218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIBSONBURG HEALTHOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683671**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERNANDEZ, ALVIN, , ,**

Mailing Address 12 INTERLAKEN RD

City  
ORLANDOState  
FLZip Code  
32804-3418FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
POWERSERVE TECHNOLOGIESOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

272.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684422**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

220.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2803 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERNANDEZ, ALVIN, , ,**

Mailing Address 12 INTERLAKEN RD

City  
ORLANDOState  
FLZip Code  
32804-3418FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
POWERSERVE TECHNOLOGIESOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684653**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEUSSER, ROBERT, , ,**

Mailing Address 40 GREYSTONE

City  
POLANDState  
OHZip Code  
44514-4206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684997**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIEBERT, CHARLYN, , ,**

Mailing Address 4334 YORK BLVD

City  
LOS ANGELESState  
CAZip Code  
90041-3220FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NPOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683168**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2804 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIEBERT, CHARLYN, , ,**

Mailing Address 4334 YORK BLVD

City  
LOS ANGELESState  
CAZip Code  
90041-3220FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NPOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.99

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683189**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HIGGINS, MARSHA, , ,**

Mailing Address P.O. BOX 48

City  
VERBANKState  
NYZip Code  
12585-0048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.67

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683897**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIGHTOWER, JOHN, , ,**

Mailing Address 2115 SE 31ST ST

City  
OKEECHOBEEState  
FLZip Code  
34974-6721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.63

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684764**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.83



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2805 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HINRICHS, IVAN, C., MR.,**

Mailing Address 2418 LA MAISON DR

City  
CHARLOTTEState  
NCZip Code  
28226-6200FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.70

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684236**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HODGE, LINDA, , MS.,**

Mailing Address 21 PERKINS RD

City  
GREENWICHState  
CTZip Code  
06830-3510FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.53

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682466**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HODGE, LINDA, , MS.,**

Mailing Address 21 PERKINS RD

City  
GREENWICHState  
CTZip Code  
06830-3510FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

468.53

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682469**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2806 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HODGE, LINDA, , MS.,**

Mailing Address 21 PERKINS RD

City  
GREENWICHState  
CTZip Code  
06830-3510FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.53

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682472**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HODGE, LINDA, , MS.,**

Mailing Address 21 PERKINS RD

City  
GREENWICHState  
CTZip Code  
06830-3510FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.53

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682476**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HODGE, LINDA, , MS.,**

Mailing Address 21 PERKINS RD

City  
GREENWICHState  
CTZip Code  
06830-3510FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

468.53

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682480**

Amount of Each Receipt this Period

34.35

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2807 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HODGE, LINDA, , MS.,**

Mailing Address 21 PERKINS RD

City  
GREENWICHState  
CTZip Code  
06830-3510FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.53

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682484**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HODGE, LINDA, , MS.,**

Mailing Address 21 PERKINS RD

City  
GREENWICHState  
CTZip Code  
06830-3510FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.53

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682497**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HODGE, LINDA, , MS.,**

Mailing Address 21 PERKINS RD

City  
GREENWICHState  
CTZip Code  
06830-3510FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

468.53

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682517**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2808 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOEL, NANCY, , ,**

Mailing Address 241 GREENBRIAR RD

City  
BEECH MOUNTAINState  
NCZip Code  
28604-8079FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682656**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLOBAUGH, JOHN, , ,**

Mailing Address 810 EAST ST

City  
ALTOONAState  
PAZip Code  
16602-5451FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684796**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLLOBAUGH, JOHN, , ,**

Mailing Address 810 EAST ST

City  
ALTOONAState  
PAZip Code  
16602-5451FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

369.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684798**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.37

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2809 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOLLOBAUGH, JOHN, , ,

Mailing Address 810 EAST ST

City  
ALTOONAState  
PAZip Code  
16602-5451FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684800

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOLLOBAUGH, JOHN, , ,

Mailing Address 810 EAST ST

City  
ALTOONAState  
PAZip Code  
16602-5451FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684803

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLMES, CAROLYN, , ,

Mailing Address 4309 LORREN DRIVE

City  
FREMONTState  
CAZip Code  
94536-7334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684946

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

55.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2810 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HORVATH, LINDA, , ,**

Mailing Address P.O. BOX 34688

City  
INDIANAPOLISState  
INZip Code  
46234-0688FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

745.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682992**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOWARD, JERAL, , ,**

Mailing Address 49 KINGS RIVER RD.

City  
NORTH LITTLE ROCKState  
ARZip Code  
72116-6312FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683177**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683709**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

103.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2811 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683719**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBER, MARY, R., ,**

Mailing Address 37641 30TH STREET

City  
ELMOREState  
MNZip Code  
56027-2035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.68

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684581**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUGHES, THEO, , ,**

Mailing Address 5502 GLENLIVET PL

City  
GREENVILLEState  
TXZip Code  
75402-4204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682304**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2812 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. INABINET, DEBORAH, O., ,**

Mailing Address 4939 VICTORIA AVENUE

City  
NORTH CHARLESTONState  
SCZip Code  
29405-4223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684982

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. INABINET, DEBORAH, O., ,**

Mailing Address 4939 VICTORIA AVENUE

City  
NORTH CHARLESTONState  
SCZip Code  
29405-4223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684985

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. INABINET, DEBORAH, O., ,**

Mailing Address 4939 VICTORIA AVENUE

City  
NORTH CHARLESTONState  
SCZip Code  
29405-4223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1481.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684986

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

156.15



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2813 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACKSON, RUBY, , ,**Mailing Address 4413 YALE ST  
UNIT CCity  
METAIRIEState  
LAZip Code  
70006-4243FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683152

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAMES, JERRY, G., MR.,**

Mailing Address 409-42 AVE.

City  
GREELEYState  
COZip Code  
80634-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
O-IOccupation (for Individual)  
MOLD TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683778

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682658

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2814 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682678

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684325

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684881

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.86

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2815 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JEFFERY, ROGER, , MR.,

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683466

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JEFFERY, ROGER, , MR.,

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683470

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JEFFERY, ROGER, , MR.,

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683479

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2816 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGSState  
IDZip Code  
83276-1671FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684354

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, SUSAN, J., MS.,**

Mailing Address 3418 E SUNCREST CT

City  
PHOENIXState  
AZZip Code  
85044-3506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRAFFICADEOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682847

Amount of Each Receipt this Period

80.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, DEBORAH, , ,**

Mailing Address 871 SUMMER BREEZE CT

City  
GRAND JUNCTIONState  
COZip Code  
81506-6701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683717

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2817 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWSState  
TXZip Code  
79714-2010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683975

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWSState  
TXZip Code  
79714-2010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684038

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JORDAN, JOHN, R., ,**

Mailing Address 1280 MAIN ST

City  
BRAWLEYState  
CAZip Code  
92227-9404FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683165

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2818 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683388**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682652**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, JAMES, , ,**

Mailing Address 6607 WOODLAND CIRCLE

City  
FORT SMITHState  
ARZip Code  
72916-8988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.78

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683910**

Amount of Each Receipt this Period

34.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2819 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KING, SHERRILL, , ,**

Mailing Address 568 THORN COVE DR.

City  
CHESNEEState  
SCZip Code  
29323-8508FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684922

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KINKLEY, GARY, A., MR.,**

Mailing Address P.O. BOX 450

City

BLAIRSDEN GRAEAGLE

State

CA

Zip Code

96103-0450

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682591

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KIRSHNER, STUART, , MR.,**

Mailing Address 22 VANGOGHLANE

City

SUFFERN

State

NY

Zip Code

10901-7725

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683017

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

210.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2820 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLEE, SHELDON, , MR.,**

Mailing Address 4359 PARK ARROYO

City  
CALABASASState  
CAZip Code  
91302-2806FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ATA CRUISES, INCOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683170

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KLOCK, MARY, , ,**

Mailing Address 5500 N 67TH PL

City  
PARADISE VALLEYState  
AZZip Code  
85253-5923FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684340

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOEKEMOER, PHILIP, , ,**

Mailing Address 545 OCEAN VIEW AVENUE

City  
ENCINITASState  
CAZip Code  
92024-2629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
QUALCOMMOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684286

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

229.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2821 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682151

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KORENEK, LAWRENCE, , ,**

Mailing Address 421FRELS

City  
EL CAMPOState  
TXZip Code  
77437-2063FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BANKEROccupation (for Individual)  
LENDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683931

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KORENEK, LAWRENCE, , ,**

Mailing Address 421FRELS

City  
EL CAMPOState  
TXZip Code  
77437-2063FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BANKEROccupation (for Individual)  
LENDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684122

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2822 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KORENEK, LAWRENCE, , ,**

Mailing Address 421FRELS

City  
EL CAMPOState  
TXZip Code  
77437-2063FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BANKEROccupation (for Individual)  
LENDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684131**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KORENEK, LAWRENCE, , ,**

Mailing Address 421FRELS

City  
EL CAMPOState  
TXZip Code  
77437-2063FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BANKEROccupation (for Individual)  
LENDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684268**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KRAUSE, CAROLYN, , ,**Mailing Address 2100 CIRCLE DR.  
APT 221City  
SCOTTSBLUFFState  
NEZip Code  
69361-1778FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER/FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682889**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2823 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUSICK, HARRY, , , JR.**Mailing Address 1290 BOYCE RD  
APT B504City  
PITTSBURGHState  
PAZip Code  
15241-3985FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684321**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUSICK, HARRY, , , JR.**Mailing Address 1290 BOYCE RD  
APT B504City  
PITTSBURGHState  
PAZip Code  
15241-3985FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684327**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LALONDE, RICHARD, , ,**

Mailing Address 3332 NW 47TH CT

City  
OCALAState  
FLZip Code  
34482-8322FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

938.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682402**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2824 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LALONDE, RICHARD , , ,**

Mailing Address 3332 NW 47TH CT

City  
OCALAState  
FLZip Code  
34482-8322FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

938.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682421**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANE, ANDREA, , ,**

Mailing Address 31345 PICKFORD AVENUE

City  
LIVONIAState  
MIZip Code  
48152-4607FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684738**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LARUE, PATRICIA, , ,**

Mailing Address 3137-B GOLDEN YEARS HOMESTEAD DR

City  
NEW HAVENState  
INZip Code  
46774-3003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682281**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.30

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2825 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LATHAM, ROY, L., MR.,

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683802

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LATHAM, ROY, L., MR.,

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683807

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAVIE, ROBERT, , ,

Mailing Address 1911 N LAMAR STREET

City  
DALLASState  
TXZip Code  
75202-1714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERSTABLE, INCOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682674

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

153.45

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2826 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAVIE, ROBERT, , ,**

Mailing Address 1911 N LAMAR STREET

City  
DALLASState  
TXZip Code  
75202-1714FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INTERSTABLE, INCOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682680**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAYCOCK, JAMES, , ,**

Mailing Address 7628 GANNON AVENUE

City  
UNIVERSITY CITYState  
MOZip Code  
63130-2819FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENTERPRISEOccupation (for Individual)  
PART TIME DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684401**

Amount of Each Receipt this Period

17.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEAVENS, CAMERON, , ,**

Mailing Address 979 SYIDA DR.

City  
PACIFIC GROVEState  
CAZip Code  
93950-5327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CAMERON LEAVENSOccupation (for Individual)  
LAND CARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

566.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683746**

Amount of Each Receipt this Period

7.29

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

128.89

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2827 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, WILLIAM, , ,**

Mailing Address 37451 BAY HARBOR DRIVE

City  
REHOBOTH BEACHState  
DEZip Code  
19971-1580FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683254**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682520**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LENNON, JOHN, , ,**

Mailing Address 737 FOLSOM STREET

City  
SAN FRANCISCOState  
CAZip Code  
94107-1244FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682342**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

177.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2828 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEONARD, ANNE, , ,**

Mailing Address 13202 HUNTERS SPRING

City  
SAN ANTONIOState  
TXZip Code  
78230-2862FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AHAOccupation (for Individual)  
SMA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.86

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682996**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LESTER, JIM, H., ,**

Mailing Address 3447 VIA LOMA VISTA

City  
ESCONDIDOState  
CAZip Code  
92029-7724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.01

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682647**

Amount of Each Receipt this Period

116.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEVASSEUR, JOANNE, , ,**

Mailing Address 351 WYASSUP ROAD

City  
NORTH STONINGTONState  
CTZip Code  
06359-1123FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682311**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

226.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2829 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEVASSEUR, JOANNE, , ,**

Mailing Address 351 WYASSUP ROAD

City  
NORTH STONINGTONState  
CTZip Code  
06359-1123FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682323**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEVY, RICHARD, P., DR.,**

Mailing Address 2785 S MAJESTIC AVE

City  
YUMAState  
AZZip Code  
85365-1170FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOUTHWEST ONCOLOGY CENTERSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683145**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEWIS, STEPHEN, , ,**

Mailing Address 5015 PROCTOR AVE

City  
OAKLANDState  
CAZip Code  
94618-2546FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683883**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

196.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2830 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LITZAU, JEROME, , ,**

Mailing Address 300 E N SHORE DR. APT 14

City  
HARTLANDState  
WIZip Code  
53029-FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.52

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683965**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LONG, ROBERT, , ,**

Mailing Address 300 BELVEDERE ST

City  
CARLISLEState  
PAZip Code  
17013-3503FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.50

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683087**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOVEJOY, RUSS, , ,**

Mailing Address 455889 E 1023 RD

City  
VIANState  
OKZip Code  
74962-9441FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683144**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2831 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOWRY, DIANE, , ,**

Mailing Address 9 WOODRIDGE RD

City  
MOULTRIEState  
GAZip Code  
31768-5815FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683763**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUTHER, ROBERT, , MR.,**

Mailing Address 2201 LAUREL OAK DRIVE

City  
VALENCIAState  
PAZip Code  
16059-8776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683758**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACARIO, KELLI, , ,**

Mailing Address 27136 SOUTH INDIAN ROAD

City  
PARK HILLState  
OKZip Code  
74451-3022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

858.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682523**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2832 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACARIO, KELLI, , ,**

Mailing Address 27136 SOUTH INDIAN ROAD

City  
PARK HILLState  
OKZip Code  
74451-3022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.69

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682542**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACDONALD, CARROLL, , ,**

Mailing Address 33575 N DOVE LAKES DR

City  
CAVE CREEKState  
AZZip Code  
85331-4102FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682584**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACEYKO, ROBERT, , ,**

Mailing Address 45 HIGHLAND AVE

City  
WALDENState  
NYZip Code  
12586-1429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BERNIES BUS SERVICE INC.Occupation (for Individual)  
SCHOOL BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

366.57

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683294**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.21

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2833 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACKEY, BERNARD, , ,**

Mailing Address PO BOX 241068

City  
OMAHA

State  
NE

Zip Code  
68124-5068

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

**02** / **13** / **2025**

**Transaction ID : SA11A.27682248**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACKEY, BERNARD, , ,**

Mailing Address PO BOX 241068

City  
OMAHA

State  
NE

Zip Code  
68124-5068

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

**02** / **13** / **2025**

**Transaction ID : SA11A.27682967**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAKOWSKI, RICHARD, , ,**

Mailing Address 701 SPANISH MAIN DR. #325

City  
CUDJOE KEY

State  
FL

Zip Code  
33042-4352

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.01

Date of Receipt

**02** / **13** / **2025**

**Transaction ID : SA11A.27683389**

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

99.76

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2834 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARETT, TOM, M., MR.,**

Mailing Address 1319 SELLERS ST

City  
PHILADELPHIAState  
PAZip Code  
19124-3627FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.53

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684104**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARSHALL, KENNETH, , ,**

Mailing Address 2 DARBY GLEN

City  
SAN ANTONIOState  
TXZip Code  
78257-1223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.35

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682625**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683181**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2835 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATEER, RAYMOND, , ,**

Mailing Address 1278 MATEER RD

City  
KITTANNINGState  
PAZip Code  
16201-8024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.08

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

Transaction ID : SA11A.27684020

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAZZONE, MARCO, L., MR.,**

Mailing Address 10694 KNIGHTS WAY

City  
NORTH ROYALTONState  
OHZip Code  
44133-1998FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICAN HERITAGE FINANCIAL ADVISORSOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.50

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

Transaction ID : SA11A.27684385

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCAULIFFE, JOHN, , ,**

Mailing Address 5 WEBSTER RD

City  
SOMERSETState  
NJZip Code  
08873-2214FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

Transaction ID : SA11A.27684376

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2836 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCNEIL, COLLIN, , ,**

Mailing Address 1701 HORSESHOE TRAIL

City  
CHESTER SPRINGSState  
PAZip Code  
19425-1814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684418**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNEIL, COLLIN, , ,**

Mailing Address 1701 HORSESHOE TRAIL

City  
CHESTER SPRINGSState  
PAZip Code  
19425-1814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684421**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCROY, GAYLE, , ,**

Mailing Address 1458 DAHLIA RD

City  
COLUMBIAState  
SCZip Code  
29205-4812FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682854**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.52



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2837 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEEHAN, JOAN, , ,**

Mailing Address 2874 GOLDEN GATE AVE

City  
SAN FRANCISCOState  
CAZip Code  
94118-4111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1962.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683790**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MELCHER, STEPHEN, , ,**

Mailing Address 2013 OKMULGEE LN

City  
CROSSVILLEState  
TNZip Code  
38572-3439FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682241**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. METHENY, WILLIAM, , ,**

Mailing Address P.O. BOX 414

City  
BRIDGERState  
MTZip Code  
59014-0414FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

352.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684058**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2838 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. METHENY, WILLIAM, , ,**

Mailing Address P.O. BOX 414

City  
BRIDGERState  
MTZip Code  
59014-0414FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684226

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. METHENY, WILLIAM, , ,**

Mailing Address P.O. BOX 414

City  
BRIDGERState  
MTZip Code  
59014-0414FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684231

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. METHENY, WILLIAM, , ,**

Mailing Address P.O. BOX 414

City  
BRIDGERState  
MTZip Code  
59014-0414FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

352.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684243

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

29.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2839 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. METHENY, WILLIAM, , ,**

Mailing Address P.O. BOX 414

City  
BRIDGERState  
MTZip Code  
59014-0414FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684246**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. METHENY, WILLIAM, , ,**

Mailing Address P.O. BOX 414

City  
BRIDGERState  
MTZip Code  
59014-0414FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684261**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, BONNIE, F., ,**

Mailing Address 14 WILMINGTON WAY

City  
CONROEState  
TXZip Code  
77384-4777FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683420**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2840 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, LINDA, , ,**

Mailing Address 145 RD 683

City  
GUNTOWNState  
MSZip Code  
38849-6530FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683842**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683157**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.16

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684678**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2841 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.16

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684695**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.16

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684752**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, SHARON, , ,**

Mailing Address 845 ARENDS RIDGE ROAD

City  
MARIETTAState  
OHZip Code  
45750-5337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

324.72

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684517**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2842 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLS, KENNETH, B., ,**

Mailing Address 110 SAINTSBURY PL

City  
LEXINGTONState  
NCZip Code  
27295-2085FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

836.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682579**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOBLEY, ROBERT, , MR.,**

Mailing Address 29823 KENTUCKY AVE

City  
MAGNOLIAState  
TXZip Code  
77354-2168FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682980**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOELLER, CHERYL, L., ,**

Mailing Address 6015 HOLLADAY RD

City  
HILLSBOROState  
OHZip Code  
45133-6579FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682599**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2843 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOHLER, JOHN, , ,**

Mailing Address 20 ENGLISH ELM COURT

City  
CATONSVILLEState  
MDZip Code  
21228-5800FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TOWEROccupation (for Individual)  
AUDITOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682971

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOLENDORP, DAYTON, , MR.,**

Mailing Address 6507 CASTLE KNOLL COURT

City  
INDIANAPOLISState  
INZip Code  
46250-1439FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682451

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684005

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2844 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTENEGRO, RAUL, , ,**

Mailing Address 1017 MONTICELLO BLVD N

City  
ST PETERSBURGState  
FLZip Code  
33703-4503FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684161**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOORE, TERESA, , MS.,**

Mailing Address 9892 W CAMINO DE ORO

City  
PEORIAState  
AZZip Code  
85383-1172FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TERESA MOOREOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682657**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRILL, PHILIP, J., MR.,**

Mailing Address 40 MT ALPINE PL

City  
CLAYTONState  
CAZip Code  
94517-1501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PGEOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

407.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683615**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.50



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2845 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684103**

Amount of Each Receipt this Period

0.20

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEEDHAM, ALFRED, , ,**Mailing Address 10 WINTER ST  
608City  
QUINCYState  
MAZip Code  
02169-8754FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682360**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEEDLE, JACQUELINE, , MRS.,**Mailing Address 3747 PEACHTREE RD NE  
APT 519City  
ATLANTAState  
GAZip Code  
30319-1329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

548.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684698**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

127.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2846 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEMEROFF, EILEEN, , ,**

Mailing Address 20 POND CROSSING

City  
SOUTHAMPTONState  
NYZip Code  
11968-4728FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1332.43

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684030**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEMEROFF, EILEEN, , ,**

Mailing Address 20 POND CROSSING

City  
SOUTHAMPTONState  
NYZip Code  
11968-4728FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1332.43

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684037**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEMEROFF, EILEEN, , ,**

Mailing Address 20 POND CROSSING

City  
SOUTHAMPTONState  
NYZip Code  
11968-4728FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1332.43

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684040**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2847 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEWSWANGER, BRIAN, , ,**

Mailing Address 237 MOUNTAIN ST

City  
PHILADELPHIAState  
PAZip Code  
19148-1319FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684747**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NGUYEN, MAITHI, , ,**

Mailing Address 1504 W 7TH ST

City  
SANTA ANAState  
CAZip Code  
92703-2913FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682339**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NICHOLS, AUBREY, A., MR.,**

Mailing Address 722 SAGEBRUSH TRL SE

City  
ALBUQUERQUEState  
NMZip Code  
87123-4166FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683516**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2848 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NIENKE, STEVE, , ,**

Mailing Address 1374 N RIDGE RD

City  
PECKState  
KSZip Code  
67120-9039FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.76

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682231**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIENKE, STEVE, , ,**

Mailing Address 1374 N RIDGE RD

City  
PECKState  
KSZip Code  
67120-9039FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.76

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682232**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NIENKE, STEVE, , ,**

Mailing Address 1374 N RIDGE RD

City  
PECKState  
KSZip Code  
67120-9039FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

594.76

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682233**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2849 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NORTHROP, RICHARD, , ,**

Mailing Address 1135 W 4TH AVE

City  
BROOMFIELDState  
COZip Code  
80020-2055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684910**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

589.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683825**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

589.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683890**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

69.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2850 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O'LEARY, GREGORY, , ,**

Mailing Address 1784 N. SAN JOAQUIN STREET

City  
STOCKTON

State  
CA

Zip Code  
95204-6016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
COLLIERS

Occupation (for Individual)  
INDUSTRIAL REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

746.70

Date of Receipt

**02** / **13** / **2025**

**Transaction ID : SA11A.27682374**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

**02** / **13** / **2025**

**Transaction ID : SA11A.27683127**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

**02** / **13** / **2025**

**Transaction ID : SA11A.27683128**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2851 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683130

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683131

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683132

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.12

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2852 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27683134**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27683798**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27683800**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

72.67



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2853 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27683803**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27683806**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27683837**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

65.21

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2854 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OSSOFF, ROBERT, , DR.,

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683841

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OSSOFF, ROBERT, , DR.,

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683893

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OVALLE, HILDA, , ,

Mailing Address 2018 HERITAGE RIDGE

City  
NORTH LAS VEGASState  
NVZip Code  
89031-0675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683774

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

82.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2855 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OWEN, JOHN, , ,**

Mailing Address 3839 BRIATGROVE LN APT6307

City  
DALLADState  
TXZip Code  
75287-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VMD INCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.51

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682602

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PALAZA, MADELEINE, , ,**

Mailing Address 69 KING ST.

City  
STOUGHTONState  
MAZip Code  
02072-3820FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682840

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PATTERSON, BARBARA, , ,**

Mailing Address 2700 SUNRUNNER LANE

City  
GULF BREEZEState  
FLZip Code  
32563-2562FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

935.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684657

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

550.51

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2856 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PATTERSON, BARBARA, , ,**

Mailing Address 2700 SUNRUNNER LANE

City  
GULF BREEZEState  
FLZip Code  
32563-2562FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.14

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684672**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAULSON, KATHLEEN, , ,**

Mailing Address 7725 E SANDALWOOD

City  
SCOTTSDALEState  
AZZip Code  
85250-7732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.55

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683377**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAULSON, KATHLEEN, , ,**

Mailing Address 7725 E SANDALWOOD

City  
SCOTTSDALEState  
AZZip Code  
85250-7732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.55

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684938**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

143.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2857 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAULSON, KATHLEEN, , ,**

Mailing Address 7725 E SANDALWOOD

City  
SCOTTSDALEState  
AZZip Code  
85250-7732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684941**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAULSON, KATHLEEN, , ,**

Mailing Address 7725 E SANDALWOOD

City  
SCOTTSDALEState  
AZZip Code  
85250-7732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684942**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAULSON, KATHLEEN, , ,**

Mailing Address 7725 E SANDALWOOD

City  
SCOTTSDALEState  
AZZip Code  
85250-7732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684943**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

132.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2858 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PERKINS, ALAN, , ,**

Mailing Address 68 ATLANTIC AVE

City  
NORTH HAMPTONState  
NHZip Code  
03862-2306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27685023

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRIN, CAROL, , MRS.,**

Mailing Address 16 ROCKY COVE RD

City  
LEXINGTONState  
SCZip Code  
29072-9763FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

921.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683277

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERS, TOM, , ,**

Mailing Address P.O. BOX 457

City  
DUFURState  
ORZip Code  
97021-0457FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BANKER FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682677

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

654.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2859 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETITJEAN, SANDRA, , ,**

Mailing Address 6832 TAMARA LANE

City  
ASSARIAState  
KSZip Code  
67416-8875FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682891

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETITJEAN, SANDRA, , ,**

Mailing Address 6832 TAMARA LANE

City  
ASSARIAState  
KSZip Code  
67416-8875FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683750

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682336

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2860 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684655**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684658**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684662**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.09



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2861 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PIEPER, KATHRYN, , ,

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682326

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PIEPER, KATHRYN, , ,

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684573

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PLUNKETT, LEE, W., DR.,

Mailing Address 8340 KENNINGSTON WAY

City  
DULUTHState  
GAZip Code  
30097-1667FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682676

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

139.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2862 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POHL, MATTHEW, J., MR.,**

Mailing Address 5146 GLEN VERDE DR

City  
BONITAState  
CAZip Code  
91902-2626FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.13

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682191**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.88

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683986**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POTKIN, JULIE, , ,**

Mailing Address 7960 SOQUEL DR.

City  
APTOSState  
CAZip Code  
95003-3995FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684491**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2863 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POWELL, LEWIS, S., ,**

Mailing Address 427 CANYON RIDGE DR

City  
RICHARDSONState  
TXZip Code  
75080-1806FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682370**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRINDLE, GLEN, , ,**

Mailing Address 942 DISCOVERY CIR NE

City  
ISSAQUAHState  
WAZip Code  
98029-6203FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SPUOccupation (for Individual)  
FACILITY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.99

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682353**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAINEY, DAVID, L., MR.,**

Mailing Address 1791 RAMPART DR.

City  
ALEXANDRIAState  
VAZip Code  
22308-1655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.78

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682736**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2864 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RANSOM, JAMES, H., DR.,**

Mailing Address 319 WOODLAND RD.

City  
SEWICKLEYState  
PAZip Code  
15143-1048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683695**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684790**

Amount of Each Receipt this Period

7.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684794**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2865 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REEVES, BOB, R., MR.,**

Mailing Address 4500 S ROLLING HILLS RD

City  
COLUMBIAState  
MOZip Code  
65201-8828FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

954.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684722**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REILLY, TOM, E., MR., JR.**

Mailing Address 8877 PICKWICK DRIVE

City  
INDIANAPOLISState  
INZip Code  
46260-1709FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684586**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REIZOVIC, ROY, , ,**

Mailing Address 8520 SUTTERFIELD DRIVE

City  
COLORADO SPRINGSState  
COZip Code  
80920-6204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.87

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683780**

Amount of Each Receipt this Period

4.96

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2866 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICHARDSON, CHRIS, , ,**

Mailing Address 4001 W SAM HOSUTON PKWY N STE 100

City  
HOUSTONState  
TXZip Code  
77043-1236FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BLAZER BUILDINGOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.50

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683005**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RICHARDSON, CHRIS, , ,**

Mailing Address 4001 W SAM HOSUTON PKWY N STE 100

City  
HOUSTONState  
TXZip Code  
77043-1236FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BLAZER BUILDINGOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.50

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683287**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683847**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.04

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2867 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLE

State  
NC

Zip Code  
28311-7675

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

**02** / **13** / **2025**

**Transaction ID : SA11A.27683865**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLE

State  
NC

Zip Code  
28311-7675

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

**02** / **13** / **2025**

**Transaction ID : SA11A.27683879**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLE

State  
NC

Zip Code  
28311-7675

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

**02** / **13** / **2025**

**Transaction ID : SA11A.27683880**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2868 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683908**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684157**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684163**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.23



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2869 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684164

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684180

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBERTSON, ROBERT, , ,**

Mailing Address 97 WEST MAIN STREET APPT. 78

City  
NIANTICState  
CTZip Code  
06357-1732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27685021

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2870 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683927**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684976**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.78

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684977**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2871 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684980

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROLKER, JOHN, G., MR.,**

Mailing Address 14 W SARATOGA ST

City  
BALTIMOREState  
MDZip Code  
21201-4207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684850

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROUSE, EPIFANIA, , ,**Mailing Address 7862 SAILBOAT KEY BLVD S  
501City  
SOUTH PASADENAState  
FLZip Code  
33707-6359FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684699

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

77.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2872 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682664**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683823**

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684346**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4.15

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2873 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVER

State  
NJ

Zip Code  
08882-1908

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27682214**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINE

State  
CA

Zip Code  
92604-2216

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.83

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27683597**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RYDZESKI, TOM, , ,**

Mailing Address 22562 MARYLHURST CT

City  
LAKE FOREST

State  
CA

Zip Code  
92630-5033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

302.05

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27682143**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

89.13

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2874 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, MELVIN, , ,**

Mailing Address 4039 MAYFLOWER CT SW

City  
LILBURN

State  
GA

Zip Code  
30047-3206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.60

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27682367**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, NICK, , ,**

Mailing Address 79 GLEN RIDGE ROAD 9406

City  
NORWICH

State  
VT

Zip Code  
05055-9406

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27684704**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHAFFNIT, WAYNE, , ,**

Mailing Address 340 DUNCAN ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94131-2022

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

357.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27684252**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

122.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2875 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHIPPER, GERRIT, , ,**

Mailing Address 2344 DIXON RD

City  
FREDERICKState  
MDZip Code  
21704-8131FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CWCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682766**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHNAIDT, LORAN, , ,**

Mailing Address 10744 FOREST PATH DRIVE

City  
SAINT LOUISState  
MOZip Code  
63128-2009FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682515**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHROEDER, STEPHEN, , ,**

Mailing Address 20722 348TH STREET

City  
TAYLORS FALLSState  
MNZip Code  
55084-2848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

912.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27685012**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2876 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHUNDLER, RUSSELL, , ,**

Mailing Address 26 POINT BREEZE ROAD

City  
WOLFEBOROState  
NHZip Code  
03894-4903FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684393**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEIBERT, ANNE MARIE, , ,**

Mailing Address 7840 BOSTON STATE ROAD

City  
HAMBURGState  
NYZip Code  
14075-7349FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.50

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684700**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SELIG, ROBERT, J., ,**

Mailing Address 65 JOLLEY DR APT 331

City  
BLOOMFIELDState  
CTZip Code  
06002-4251FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

639.32

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684641**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

202.48



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2877 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SELIG, ROBERT, J., ,**

Mailing Address 65 JOLLEY DR APT 331

City  
BLOOMFIELDState  
CTZip Code  
06002-4251FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684643**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SELIG, ROBERT, J., ,**

Mailing Address 65 JOLLEY DR APT 331

City  
BLOOMFIELDState  
CTZip Code  
06002-4251FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684651**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SELZER, INGRID, , ,**

Mailing Address 2614 MEADOW LANE

City  
LA MARQUEState  
TXZip Code  
77568-5044FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

228.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683820**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2878 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHECHTMAN, ARLEAH, , ,**

Mailing Address 1381 CREEKSIDE CT.

City  
KALISPELLState  
MTZip Code  
59901-9024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
THERAPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682461**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHEDLOCK, JOHN, , ,**

Mailing Address 10089 IRON MOUNTAIN CT

City  
RANCHO CUCAMONGAState  
CAZip Code  
91737-6831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682729**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHEIKH, JAMIL, , ,**Mailing Address 1345 AVENUE OF THE AMERICAS  
2ND FLOORCity  
NEW YORKState  
NYZip Code  
10105-0302FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JSARCHITECTSOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

374.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683109**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2879 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHIVELY, KENNETH, , ,**

Mailing Address PO BOX 25333

City  
TUCSONState  
AZZip Code  
85734-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683185**

Amount of Each Receipt this Period

24.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683126**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683557**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2880 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683559**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683560**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683567**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

44.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2881 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHUTT, MARILYN, , ,**

Mailing Address 614 COUNTY ROAD 312

City  
EDNAState  
TXZip Code  
77957-0320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683985**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIMPSON, BARBRA, , ,**

Mailing Address 872 5TH STREET

City

MANHATTAN BEACH

State

CA

Zip Code

90266-6664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684469**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SINCLAIR, PATRICIA, N., MRS.,**

Mailing Address 1739 N TULARE WAY

City

UPLAND

State

CA

Zip Code

91784-1961

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682803**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2882 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINCLAIR, PATRICIA, N., MRS.,**

Mailing Address 1739 N TULARE WAY

City  
UPLANDState  
CAZip Code  
91784-1961FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.39

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683455**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SINGH, BHUPINDER, , ,**

Mailing Address 13371 SOUTH FOWLER AVENUE

City  
SELMAState  
CAZip Code  
93662-9501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KHALSA TRANSPORTATION INCOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684329**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SISON, JOSEPHINE, , ,**

Mailing Address 822 LINCOLN STREET

City  
AMHERSTState  
OHZip Code  
44001-1059FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683381**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2883 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLOCUMB, JOANELLEN, H., MRS.,**

Mailing Address PO 3892

City  
INCLINE VILLAGEState  
NVZip Code  
89450-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683417**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMALLWOOD, MARJORIE, , MS.,**

Mailing Address 2315 ATTALA ROAD 3121

City  
VAIDENState  
MSZip Code  
39176-9549FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682412**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, DANIEL, G., MR.,**Mailing Address 7 WOODBINE RD  
APT 100City  
FLORHAM PARKState  
NJZip Code  
07932-2649FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

533.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683297**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2884 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, RAYMOND, L., DR.,**

Mailing Address 2210 BRESSLER DRIVE

City  
WYOMISSINGState  
PAZip Code  
19610-1506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TOWERHEALTHOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684825**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683038**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684769**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.16



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2885 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683013**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684974**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SNYDER, ROBERT, A., MR.,**Mailing Address 5 OLD POST RD 3  
LOT 14City  
MILLERTONState  
NYZip Code  
12546-4969FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BOOK SELLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

408.34

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683266**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2886 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SODITUS, CONSTANCE, A., ,**

Mailing Address 21608 O. LANE. APT. 116

City  
OCEAN PARKState  
WAZip Code  
98640-3225FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684987

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SODITUS, CONSTANCE, A., ,**

Mailing Address 21608 O. LANE. APT. 116

City  
OCEAN PARKState  
WAZip Code  
98640-3225FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684999

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOSNICK, NIKKE, R., MS.,**

Mailing Address 510 PAJARO CT

City  
SACRAMENTOState  
CAZip Code  
95864-7229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DESIGNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684080

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

122.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2887 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPALLONE, ARLENE, , ,**

Mailing Address 5925 BRAE BURN CIR

City  
VERO BEACHState  
FLZip Code  
32967-5277FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.16

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683235**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682814**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

776.13

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682894**

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.03

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2888 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEAD, LINDA, , ,

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2025

Transaction ID : SA11A.27682930

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEAD, LINDA, , ,

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2025

Transaction ID : SA11A.27684348

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEELE, MERILYN, , ,

Mailing Address 7040 AVENIDA ENCINAS # 104-239

City  
CARLSBADState  
CAZip Code  
92011-4652FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MESSNER STEELE LAW FIRM, PCOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2025

Transaction ID : SA11A.27683734

Amount of Each Receipt this Period

22.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

24.96

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2889 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEELE, MERILYN, , ,**

Mailing Address 7040 AVENIDA ENCINAS # 104-239

City  
CARLSBAD

State  
CA

Zip Code  
92011-4652

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
MESSNER STEELE LAW FIRM, PC

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.90

Date of Receipt

**02** / **13** / **2025**

**Transaction ID : SA11A.27683781**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEINER, DAN, , ,**

Mailing Address 1505 FOREST PARK AVE

City  
VALPARAISO

State  
IN

Zip Code  
46385-3361

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DAN STEINER

Occupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

698.00

Date of Receipt

**02** / **13** / **2025**

**Transaction ID : SA11A.27683211**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEINER, VALERIE, , ,**

Mailing Address 1505 FOREST PARK AVE

City  
VALPARAISO

State  
IN

Zip Code  
46385-3361

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.30

Date of Receipt

**02** / **13** / **2025**

**Transaction ID : SA11A.27684069**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

385.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2890 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STITT, DALE, , ,**

Mailing Address 6004 WATERVIEW DR

City  
ARLINGTONState  
TXZip Code  
76016-2044FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.52

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682633**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOKLEY, LEE ANN, ANN, MRS.,**

Mailing Address 916 S CULLEN AVE

City  
EVANSVILLEState  
INZip Code  
47715-4144FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.30

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682557**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOKLEY, LEE ANN, ANN, MRS.,**

Mailing Address 916 S CULLEN AVE

City  
EVANSVILLEState  
INZip Code  
47715-4144FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.30

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684396**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2891 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682578

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRIMPLE, EARL, O., DR.,**Mailing Address 6200 OREGON AVE NW  
APT 303City  
WASHINGTONState  
DCZip Code  
20015-1538FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683256

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STURGILL, LARRY, , ,**

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

527.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684083

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2892 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUMNET, JASPER, , ,**

Mailing Address 825 KENTUCKY STREET

City  
GRAHAMState  
TXZip Code  
76450-3512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682296

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUMNET, JASPER, , ,**

Mailing Address 825 KENTUCKY STREET

City  
GRAHAMState  
TXZip Code  
76450-3512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27684381

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TALLEY, RICHARD, , ,**Mailing Address 2777 PARADISE RD  
3606City  
LAS VEGASState  
NVZip Code  
89109-9126FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682874

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

96.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2893 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TARR, ANNE, , ,**

Mailing Address 13306 SOUTHWALK

City  
SAN ANTONIOState  
TXZip Code  
78232-4843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

987.25

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684191**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TECMIRE, EUNICE, M., ,**

Mailing Address 888 TWIN CREEKS CROSSING 308

City  
CENTRAL POINTState  
ORZip Code  
97502-5507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.97

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682262**

Amount of Each Receipt this Period

7.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TECMIRE, EUNICE, M., ,**

Mailing Address 888 TWIN CREEKS CROSSING 308

City  
CENTRAL POINTState  
ORZip Code  
97502-5507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

447.97

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682263**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2894 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TECMIRE, EUNICE, M., ,**

Mailing Address 888 TWIN CREEKS CROSSING 308

City  
CENTRAL POINTState  
ORZip Code  
97502-5507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682265

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TECMIRE, EUNICE, M., ,**

Mailing Address 888 TWIN CREEKS CROSSING 308

City  
CENTRAL POINTState  
ORZip Code  
97502-5507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682266

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TECMIRE, EUNICE, M., ,**

Mailing Address 888 TWIN CREEKS CROSSING 308

City  
CENTRAL POINTState  
ORZip Code  
97502-5507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

447.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682269

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.80

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2895 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TECMIRE, EUNICE, M., ,**

Mailing Address 888 TWIN CREEKS CROSSING 308

City  
CENTRAL POINT

State  
OR

Zip Code  
97502-5507

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.97

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27682818**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TEDOLDI, ROBERT, L., MR., SR.**

Mailing Address 1438 WOODSTREAM DR.

City  
OLDSMAR

State  
FL

Zip Code  
34677-4832

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.50

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27683696**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THIELEN, THEO, , ,**

Mailing Address 509 8TH ST W

City  
PARK RAPIDS

State  
MN

Zip Code  
56470-1375

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THIELEN MOTORS INC.

Occupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

427.87

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27682780**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

140.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2896 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THIELEN, THEO, , ,**

Mailing Address 509 8TH ST W

City  
PARK RAPIDSState  
MNZip Code  
56470-1375FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THIELEN MOTORS INC.Occupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682789**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMAS, AFTON, , MS.,**

Mailing Address 2178 E BENDAMERE CIR

City  
SALT LAKE CITYState  
UTZip Code  
84109-1907FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682284**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMAS, ALAN, , ,**Mailing Address 3985 MACEACHEN BLVD  
APT 233City  
SARASOTAState  
FLZip Code  
34233-1100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684250**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2897 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, BEAM, , ,**Mailing Address 55 S KUKUI ST  
APT D2702City  
HONOLULUState  
HIZip Code  
96813-2326FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682483**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, WILLIAM, , MR.,**

Mailing Address 204 MANDALAY

City  
SAN MARCOSState  
TXZip Code  
78666-3631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684029**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TOM, ANGELICA, , ,**Mailing Address 2916 DATE ST  
9CCity  
HONOLULUState  
HIZip Code  
96816-1186FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WAILANA COFFEE HOUSEOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683449**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2898 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684088**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TWISDOM, DONNA, , ,**

Mailing Address 621 HELENA CT

City  
UPLANDState  
CAZip Code  
91786-2346FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MEDTRONIC DIABETESOccupation (for Individual)  
MANAGER OF OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.74

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684167**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ULZHEIMER, BOB, , ,**

Mailing Address 4011 GUNNIN ROAD

City  
NORCROSSState  
GAZip Code  
30092-1949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.93

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682808**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.04

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2899 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN ROEKEL, MELANIE, J., ,**

Mailing Address 2602 100TH STREET

City  
WILTON

State  
IA

Zip Code  
52778-9550

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.13

Date of Receipt

**02** / **13** / **2025**

**Transaction ID : SA11A.27683176**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VANVALKENBURG, ANN, , ,**

Mailing Address P.O. BOX 1124

City  
PUEBLO

State  
CO

Zip Code  
81002-1124

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ANESTHESIA PAIN MANAGEMENT

Occupation (for Individual)  
NURSE ANESTHETIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**02** / **13** / **2025**

**Transaction ID : SA11A.27682386**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VASEK, GARY, R., MR.,**

Mailing Address 6387 ASHCROFT DR.

City  
COLORADO SPRINGS

State  
CO

Zip Code  
80918-3241

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.85

Date of Receipt

**02** / **13** / **2025**

**Transaction ID : SA11A.27682991**

Amount of Each Receipt this Period

21.07

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

46.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2900 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VENNUM, PAULINE, , ,**

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDOState  
FLZip Code  
32801-4360FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682229

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VERPLANCK, JAMES, S., MR.,**

Mailing Address 3525 BRIDGEFIELD DR.

City  
LAKELANDState  
FLZip Code  
33803-5912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683487

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VERPLANK, JOEL, , MR.,**

Mailing Address 9212 TURTLE POINT DR.

City  
KILLENState  
ALZip Code  
35645-2854FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VERPLANK ENTERPRISESOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

298.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682522

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2901 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VITALI, THEODORE, , ,**

Mailing Address 9802 WINTERNIGHT LANE

City  
SAINT LOUISState  
MOZip Code  
63126-3246FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ST. LOUIS UNIVERSITYOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.90

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684620**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VITALI, THEODORE, , ,**

Mailing Address 9802 WINTERNIGHT LANE

City  
SAINT LOUISState  
MOZip Code  
63126-3246FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ST. LOUIS UNIVERSITYOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.90

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684621**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684631**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2902 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684727**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VOLK, BEVERLY, , ,**

Mailing Address 1511 RED MAPLE LANE

City  
ALLENTOWNState  
PAZip Code  
18104-2011FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.43

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27685030**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VON SCHIMMELMANN, KAREN, , ,**

Mailing Address 12521 GRITSTONE DRIVE

City  
DENTONState  
TXZip Code  
76207-5747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.76

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682834**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.91

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2903 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VON SCHIMMELMANN, KAREN, , ,**

Mailing Address 12521 GRITSTONE DRIVE

City  
DENTON

State  
TX

Zip Code  
76207-5747

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.76

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27684002**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VOWELL, BELITA, J., MRS.,**

Mailing Address 508 GRASSMEADE COVE

City  
CORDOVA

State  
TN

Zip Code  
38018-7670

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.11

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27682500**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VOWELL, BELITA, J., MRS.,**

Mailing Address 508 GRASSMEADE COVE

City  
CORDOVA

State  
TN

Zip Code  
38018-7670

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

335.11

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025

**Transaction ID : SA11A.27682514**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

51.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2904 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WADDELL, JENETTA, , ,**

Mailing Address PO BOX 215

City  
TUSCUMBIAState  
ALZip Code  
35674-0215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BLUE MOUNTAIN CHRISTIAN UNIVERSITYOccupation (for Individual)  
DEAN, SCHOOL OF EDUCATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

643.56

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684156**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKINGTON, PAT, , ,**

Mailing Address 11765 N 135TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-3633FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.56

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683302**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALKINGTON, PAT, , ,**

Mailing Address 11765 N 135TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-3633FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

718.56

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683654**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2905 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALKINGTON, PAT, , ,**

Mailing Address 11765 N 135TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-3633FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.56

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683662**

Amount of Each Receipt this Period

0.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALTERS, JOSEPH, , ,**Mailing Address 2980 E NORTHERN AVE  
STE ACity  
PHOENIXState  
AZZip Code  
85028-4846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.52

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684645**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WASMER, PEDRO, E., MR.,**

Mailing Address 201 OLD ACADEMY ROAD

City  
FAIRFIELDState  
CTZip Code  
06824-7162FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684436**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2906 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATKINS, MARK, A., MR.,**

Mailing Address 304 EAST LAKE GENEVA ROAD NE

City  
ALEXANDRIAState  
MNZip Code  
56308-8906FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GENEVA CAPITAL LLCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684682**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEBSTER, DANIEL, , ,**

Mailing Address 15724 LAKE HODGE CT

City  
CLERMONTState  
FLZip Code  
34711-9655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOUSE OF REPRESENTATIVESOccupation (for Individual)  
MEMBER OF CONGRESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684459**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELLS, JOE, , ,**

Mailing Address 207 JULIUS AVENUE

City  
PIKEVILLEState  
KYZip Code  
41501-1739FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MASON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682420**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2907 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WESTFALL, ANNE, , ,

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIAState  
WAZip Code  
98531-8894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682148

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WESTFALL, ANNE, , ,

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIAState  
WAZip Code  
98531-8894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27683720

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WESTFALL, ROBERT, , ,

Mailing Address 3209 SETON HILL DR

City  
BELLBROOKState  
OHZip Code  
45305-8820FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682399

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2908 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITE, JAMES, , ,**

Mailing Address 1247 CHEE LANE

City  
TALLAHASSEEState  
FLZip Code  
32304-1662FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PUBLIXOccupation (for Individual)  
FRONT- END CLARK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2025

**Transaction ID : SA11A.27683026**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WIDGER, WILLIAM, , ,**

Mailing Address 20920 MINES RD.

City  
LIVERMOREState  
CAZip Code  
94550-9033FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2025

**Transaction ID : SA11A.27683608**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIDGER, WILLIAM, , ,**

Mailing Address 20920 MINES RD.

City  
LIVERMOREState  
CAZip Code  
94550-9033FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2025

**Transaction ID : SA11A.27683627**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

303.20



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2909 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, BETTY, , ,**

Mailing Address 311 HARPER LOOP

City  
GRANTS PASSState  
ORZip Code  
97527-5339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2025

**Transaction ID : SA11A.27682462**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, BETTY, , ,**

Mailing Address 311 HARPER LOOP

City  
GRANTS PASSState  
ORZip Code  
97527-5339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2025

**Transaction ID : SA11A.27683120**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMS, ROBERT, M., ,**

Mailing Address 2541 RIO LISBO CT

City  
PUNTA GORDAState  
FLZip Code  
33950-6317FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2025

**Transaction ID : SA11A.27684507**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1046.85

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2910 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, JEAN, , ,**

Mailing Address **5644 ARAL DRIVE**

City  
**LAKELAND**

State  
**FL**

Zip Code  
**33805-9615**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**266.62**

Date of Receipt

**02 / 13 / 2025**

**Transaction ID : SA11A.27683409**

Amount of Each Receipt this Period

**5.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, JEAN, , ,**

Mailing Address **5644 ARAL DRIVE**

City  
**LAKELAND**

State  
**FL**

Zip Code  
**33805-9615**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**266.62**

Date of Receipt

**02 / 13 / 2025**

**Transaction ID : SA11A.27683995**

Amount of Each Receipt this Period

**4.95**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, STEVE, , ,**

Mailing Address **1305 233RD ST SE**

City  
**BOTHELL**

State  
**WA**

Zip Code  
**98021-5804**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**428.64**

Date of Receipt

**02 / 13 / 2025**

**Transaction ID : SA11A.27683310**

Amount of Each Receipt this Period

**75.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**84.95**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2911 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINCHESTER, JANE, A., MS.,**

Mailing Address 18 MEADOW LN

City  
GREENFIELDState  
MAZip Code  
01301-9702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.84

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682260**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WITT, FRANCIS, M., MR., III**

Mailing Address 500 ROLLING HILLS RD

City  
COPPELLState  
TXZip Code  
75019-4049FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683434**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOLFF, PAMELA, , ,**

Mailing Address 2709 SE EAGLE DR.

City  
PORT SAINT LUCIEState  
FLZip Code  
34984-8916FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683707**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

240.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2912 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, RICHARD, L., ,**

Mailing Address 14416 BEACH RD.

City  
CHESTERFIELDState  
VAZip Code  
23838-2307FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684792**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WU, CHRIS, , ,**

Mailing Address 1914 ISLA DE PALMA CIRCLE

City  
NAPLESState  
FLZip Code  
34119-3402FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684535**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682467**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2913 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27682748**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YANEROALBERT, DIANA, , ,**

Mailing Address 125 TAMPA AVENUE

City  
INDIALANTICState  
FLZip Code  
32903-3542FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27684245**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YEARY, WILLIE, , MR.,**

Mailing Address 300 S WHEELER ST

City  
JASPERState  
TXZip Code  
75951-4536FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683704**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2914 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOSHIMOTO, MYLES, , ,**

Mailing Address 91-1321 KINOIKI STREET

City  
KAPOLEIState  
HIZip Code  
96707-4106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682594

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOSHIMOTO, MYLES, , ,**

Mailing Address 91-1321 KINOIKI STREET

City  
KAPOLEIState  
HIZip Code  
96707-4106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682597

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YOSHIMOTO, MYLES, , ,**

Mailing Address 91-1321 KINOIKI STREET

City  
KAPOLEIState  
HIZip Code  
96707-4106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA11A.27682598

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2915 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOSHIMOTO, MYLES, , ,**

Mailing Address 91-1321 KINOIKI STREET

City  
KAPOLEIState  
HIZip Code  
96707-4106FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.29

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27682601**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNG, PATRICIA, , ,**

Mailing Address 9940 PREMIERE VIEW CIR

City  
HAGERSTOWNState  
MDZip Code  
21740-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.42

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27684466**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZOLLER, JIM, , ,**

Mailing Address 120 NIATROSS CT

City  
RENOState  
NVZip Code  
89521-6345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

206.17

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2025**Transaction ID : SA11A.27683220**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2916 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZWAAN, ROBERT, , ,**

Mailing Address 3516 RHOADS AVENUE

City  
NEWTOWN SQUAREState  
PAZip Code  
19073-3718FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PETCARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11A.27683286**

Amount of Each Receipt this Period

22.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11C.27687542**

Amount of Each Receipt this Period

84229.77

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688969**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27.90



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2917 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689752

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAMS, SCARLETT, , ,**Mailing Address P.O. BOX 6880, 124 HARLESTON GREEN  
#44

City

SNOWMASS VILLAGE

State  
COZip Code  
81615-6880FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CROWN CHOCOLATEOccupation (for Individual)  
MARKETING EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688914

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AGUILERA, ROBERT, A., MR.,**

Mailing Address 8185 BENEVENTO DR

City

EL DORADO HILLS

State  
CAZip Code  
95762-6217FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

359.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687851

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2918 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALBERS, GREGG, , ,**

Mailing Address 220 FOX BRIAR LN

City  
MADISON HEIGHTSState  
VAZip Code  
24572-2770FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CVFPOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689181**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALFARO, ROSA, , ,**

Mailing Address 3059 HAWKSCREST DR

City  
WINCHESTERState  
CAZip Code  
92596-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689139**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

773.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688003**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2919 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.88

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688000**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.88

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689715**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMSTUTZ, SHERYL, , ,**Mailing Address 1307 S WATER ST  
UNIT 90City  
SILVERTONState  
ORZip Code  
97381-2471FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

866.44

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687595**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2920 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689571**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CYNIE, , ,**

Mailing Address 55 RODEO AVENUE # 5

City  
SAUSALITOState  
CAZip Code  
94965-1738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.62

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27690104**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, SUE, , ,**

Mailing Address 1044 CHURCH ST., NO.134

City  
SULPHUR SPRINGSState  
TXZip Code  
75482-2272FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.08

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689688**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2921 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARNOLD, RUSSELL, , ,**

Mailing Address 966 BLUESTEM DRIVE

City  
GENEVAState  
ILZip Code  
60134-3732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687556

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARNOLD, RUSSELL, , ,**

Mailing Address 966 BLUESTEM DRIVE

City  
GENEVAState  
ILZip Code  
60134-3732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687805

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ASTOR, MARY, , ,**

Mailing Address 2380 NE 193RD ST

City  
MIAMIState  
FLZip Code  
33180-2126FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687967

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

129.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2922 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BACHELDOR, NED, , ,**Mailing Address 630 CAROLINA BAY DR  
APT 209City  
WILMINGTONState  
NCZip Code  
28403-2038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688807**

Amount of Each Receipt this Period

9.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BALK-MOLLER, GORDANA, , ,**

Mailing Address 9 COQUINA CLIFF CIRCLE

City  
ORMOND BEACHState  
FLZip Code  
32174-1602FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688106**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAMERT, TOM, , ,**

Mailing Address BOX 336

City  
IONEState  
CAZip Code  
95640-0336FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1402.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688425**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2923 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARANEK, DARLENE, , ,**

Mailing Address 197 EAST FAIRLAWN BLVD

City  
AKRONState  
OHZip Code  
44313-4436FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688483**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARR, SUSAN, , ,**

Mailing Address 20151 PORT GREENWICH LANE

City

HUNTINGTON BEACH

State

CA

Zip Code

92646-4444

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689827**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BASSHAM, CAROL, , ,**

Mailing Address 3351 S 175TH ST APT 200

City

SEATAC

State

WA

Zip Code

98188-4408

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

326.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688427**

Amount of Each Receipt this Period

72.87

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

202.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2924 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BENSON, ELIZABETH, , ,**Mailing Address 200 N OCEAN BLVD  
9NCity  
DELRAY BEACHState  
FLZip Code  
33483-7178FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.94

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688115**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BENZEL, LIN, , ,**

Mailing Address 980 E SADDLEHORN RD

City  
SEDONAState  
AZZip Code  
86351-7421FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689284**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BIRDLEBOUGH, MICHAEL, , ,**

Mailing Address 201 CRESTWOOD DR.

City  
FREDERICKSBURGState  
TXZip Code  
78624-2803FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689763**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

246.10



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2925 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACK, JANE, , MRS.,**

Mailing Address P.O. BOX 703

City  
NESHANIC STATION

State  
NJ

Zip Code  
08853-0703

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

**Transaction ID : SA11A.27688446**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLAHNIK, PATRICIA, C., ,**

Mailing Address 258 N WEST END BLVD, #312

City  
QUAKERTOWN

State  
PA

Zip Code  
18951-2324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

**Transaction ID : SA11A.27688009**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTON

State  
TX

Zip Code  
77077-3846

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

**Transaction ID : SA11A.27688196**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

273.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2926 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688206

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688207

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688213

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.01

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2927 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTON

State  
TX

Zip Code  
77077-3846

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

**02** / **14** / **2025**

**Transaction ID : SA11A.27688216**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTON

State  
TX

Zip Code  
77077-3846

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

**02** / **14** / **2025**

**Transaction ID : SA11A.27688220**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTON

State  
TX

Zip Code  
77077-3846

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

820.31

Date of Receipt

**02** / **14** / **2025**

**Transaction ID : SA11A.27688226**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

53.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2928 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOULINEAU, EDWARD, C., MR.,**

Mailing Address 100 CIRCLE DR

City  
STATESBOROState  
GAZip Code  
30461-0578FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687812**

Amount of Each Receipt this Period

25.28

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOX, SALLY, , ,**

Mailing Address 4885 SEVIERVILLE RD

City  
MARYVILLEState  
TNZip Code  
37804-4651FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688636**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMASState  
ORZip Code  
97015-8629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688150**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2929 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYD, PAMELA, , ,**

Mailing Address 3703 LAKE EDGE DRIVE

City  
SUWANEEState  
GAZip Code  
30024-7415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688300**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYDSTON, JANICE, , ,**

Mailing Address 2197 E ORIOLE DR.

City  
GILBERTState  
AZZip Code  
85297-2217FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687666**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOZEMAN, BARBARA, , ,**

Mailing Address 2414 HIGHWAY 53 E

City  
JASPERState  
GAZip Code  
30143-4346FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687616**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

168.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2930 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BREITBACH, PAUL, , ,**

Mailing Address 320 BUCKINGHAM RD

City  
WINSTON SALEMState  
NCZip Code  
27104-4027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689583**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BREWER, RICHARD, , ,**

Mailing Address 25408 EAST LENOX CIRCLE

City  
PUNTA GORDAState  
FLZip Code  
33950-1337FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689997**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROSTOWITZ, MICHAEL, , MR.,**Mailing Address 1322 S PRAIRIE AVE  
UNIT 1606City  
CHICAGOState  
ILZip Code  
60605-3083FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

349.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689332**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2931 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688931

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688935

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRUMBAUGH, PHILIP, C., MR.,**

Mailing Address 108 PHILIP DR

City  
WEST MILTONState  
OHZip Code  
45383-1330FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687635

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2932 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITYState  
NJZip Code  
08226-2367FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.96

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688497**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURGIN, JAMES, A., MR.,**

Mailing Address 23030 WELBOURNE WALK CT

City  
ASHBURNState  
VAZip Code  
20148-1747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.79

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687692**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURLAND, ALICE, , ,**

Mailing Address 4214 WATERBECK ST

City  
FULSHEARState  
TXZip Code  
77441-3904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.86

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688010**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

64.80



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2933 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURLAND, ALICE, , ,**

Mailing Address 4214 WATERBECK ST

City  
FULSHEARState  
TXZip Code  
77441-3904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688355**

Amount of Each Receipt this Period

9.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURR, LAWRENCE, , MR.,**

Mailing Address 31065 CASTLE RIDGE DRIVE

City  
BROOKSVILLEState  
FLZip Code  
34602-7529FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688505**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURROW, WILEY, , ,**

Mailing Address 19429 LAUREL GLEN AVE.

City  
CORNELIUSState  
NCZip Code  
28031-6505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689427**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2934 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUSTARD, ANN, , ,**

Mailing Address 4512 GREENVIEW RD.

City  
TRENT WOODSState  
NCZip Code  
28562-7634FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689704**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BYRUM, LYLE, , MR.,**

Mailing Address 7007 BOEING

City  
EL PASOState  
TXZip Code  
79925-1109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ATI JET INC.Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687933**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CADICAMO, EVELYN, M., MRS.,**

Mailing Address 43577 SERENITY DR

City  
NORTHVILLEState  
MIZip Code  
48167-8932FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688816**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2935 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CADY, WILLIAM, CURTIS, MR.,**

Mailing Address 1426 SOUTH 50TH STREET

City  
KANSAS CITYState  
KSZip Code  
66106-1726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.92

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689379**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAFFREY, PETER, , ,**

Mailing Address 4 BRIARCLIFF ROAD

City  
MORRIS PLAINSState  
NJZip Code  
07950-2907FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.87

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688296**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, FRANCIS, C., MR.,**

Mailing Address 5432 S SALVATION PL.

City  
SIOUX FALLSState  
SDZip Code  
57108-8543FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.96

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688874**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2936 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, FRANCIS, C., MR.,**

Mailing Address 5432 S SALVATION PL.

City  
SIOUX FALLSState  
SDZip Code  
57108-8543FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688879

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, FRANCIS, C., MR.,**

Mailing Address 5432 S SALVATION PL.

City  
SIOUX FALLSState  
SDZip Code  
57108-8543FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688880

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, FRANCIS, C., MR.,**

Mailing Address 5432 S SALVATION PL.

City  
SIOUX FALLSState  
SDZip Code  
57108-8543FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

953.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688889

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2937 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, FRANCIS, C., MR.,**

Mailing Address 5432 S SALVATION PL.

City  
SIOUX FALLSState  
SDZip Code  
57108-8543FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688891

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, FRANCIS, C., MR.,**

Mailing Address 5432 S SALVATION PL.

City  
SIOUX FALLSState  
SDZip Code  
57108-8543FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688895

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, FRANCIS, C., MR.,**

Mailing Address 5432 S SALVATION PL.

City  
SIOUX FALLSState  
SDZip Code  
57108-8543FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

953.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688898

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

95.93

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2938 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, FRANCIS, C., MR.,**

Mailing Address 5432 S SALVATION PL.

City  
SIOUX FALLS

State  
SD

Zip Code  
57108-8543

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

**Transaction ID : SA11A.27688902**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARISONE, ANTOINETTE, , ,**

Mailing Address 10 VITALE TRL

City  
GREEN BROOK

State  
NJ

Zip Code  
08812-1904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

**Transaction ID : SA11A.27687749**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDEN

State  
AL

Zip Code  
35901-4055

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICE

Occupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

**Transaction ID : SA11A.27689853**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

88.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2939 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687831**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHAN, CECELIA, , ,**

Mailing Address 14568 CIRCLE BAR WAY

City  
NEVADA CITYState  
CAZip Code  
95959-9092FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689230**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAN, CECELIA, , ,**

Mailing Address 14568 CIRCLE BAR WAY

City  
NEVADA CITYState  
CAZip Code  
95959-9092FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

457.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689438**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

333.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2940 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANDRA, HAROLD, , ,**

Mailing Address 132 OLD LAKE ST

City  
WEST HARRISONState  
NYZip Code  
10604-1611FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689356**

Amount of Each Receipt this Period

44.55

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689946**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANG, KAREN, , ,**

Mailing Address 1221 VICTORIA STREET

City  
HONOLULUState  
HIZip Code  
96814-1430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689264**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

103.55



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2941 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHAREST, BARBARA, , ,**

Mailing Address 16H CASTLE HILL RD

City  
AGAWAMState  
MAZip Code  
01001-2481FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688530**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHELLIS, MIKE, , ,**

Mailing Address 8354 LUCE CT

City  
SPRINGFIELDState  
VAZip Code  
22153-3318FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DHHSOccupation (for Individual)  
PHA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687580**

Amount of Each Receipt this Period

150.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHRISTIE, JOHN, , ,**

Mailing Address 1575 HERITAGE DR, STE 107

City  
MCKINNEYState  
TXZip Code  
75069-3395FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

698.65

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689552**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

303.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2942 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CIACCIO, JANE, , ,**Mailing Address **5491 BEECHMONT AVE**  
**APT 506**City  
**CINCINNATI**State  
**OH**Zip Code  
**45230-1160**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**841.25**

Date of Receipt

**02 / 14 / 2025****Transaction ID : SA11A.27688516**

Amount of Each Receipt this Period

**36.44**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CIPOLLINA, NATALE, , ,**Mailing Address **6 S 12TH ST**City  
**NEW HYDE PARK**State  
**NY**Zip Code  
**11040-4930**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**BARUCH COLLEGE**Occupation (for Individual)  
**ADJUNCT PROFESSOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**251.01**

Date of Receipt

**02 / 14 / 2025****Transaction ID : SA11A.27690127**

Amount of Each Receipt this Period

**31.23**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CIPOLLINA, NATALE, , ,**Mailing Address **6 S 12TH ST**City  
**NEW HYDE PARK**State  
**NY**Zip Code  
**11040-4930**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**BARUCH COLLEGE**Occupation (for Individual)  
**ADJUNCT PROFESSOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**251.01**

Date of Receipt

**02 / 14 / 2025****Transaction ID : SA11A.27690132**

Amount of Each Receipt this Period

**35.00**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►**102.67**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2943 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CITRON, DIANE, M., MRS.,**

Mailing Address 2620 ARIZONA AVE, APT 3

City  
SANTA MONICAState  
CAZip Code  
90404-1415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.31

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689226**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, WILLIAM, , ,**

Mailing Address 5040 GOLDEN CIRCLE

City  
DENTONState  
TXZip Code  
76208-3552FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.76

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687720**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLAVEL, ROBERT, L., MR.,**

Mailing Address 827 CARILLON DR.

City  
BARTLETTState  
ILZip Code  
60103-4596FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

718.41

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688193**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2944 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLAVEL, ROBERT, L., MR.,**

Mailing Address 827 CARILLON DR.

City  
BARTLETTState  
ILZip Code  
60103-4596FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689543**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLINE, JOHN, P., MR.,**

Mailing Address 3 W ST

City  
LAKE LOTAWANAState  
MOZip Code  
64086-9757FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CLINE WOOD AGENCYOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688548**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COCHRAN, EMMA JANE, , ,**

Mailing Address 8311 MORNINGSIDE DRIVE

City  
MANASSASState  
VAZip Code  
20112-3513FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689778**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2945 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COCHRAN, TIM, , ,**

Mailing Address 3130 SILVER SAGE DRIVE

City  
CARSON CITYState  
NVZip Code  
89701-6190FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTERN AMERICAN FOODSOccupation (for Individual)  
FOOD MANUFACTURE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689216**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLBY, ELINOR, , ,**

Mailing Address 12738 RUE VINCENNES

City  
SAN DIEGOState  
CAZip Code  
92131-2257FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689268**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLE, ROBERT, , ,**

Mailing Address 150 LAKEVIEW DRIVE

City  
WOODSIDEState  
CAZip Code  
94062-1125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

932.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689087**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1148.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2946 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLE, ROBERT, , ,**

Mailing Address 150 LAKEVIEW DRIVE

City  
WOODSIDEState  
CAZip Code  
94062-1125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

932.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689089

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLE, ROBERT, , ,**

Mailing Address 150 LAKEVIEW DRIVE

City  
WOODSIDEState  
CAZip Code  
94062-1125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

932.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689100

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688672

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

244.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2947 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688681**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.49

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688720**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.49

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688757**

Amount of Each Receipt this Period

1.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8.13

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2948 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARS

State  
PA

Zip Code  
16046-0988

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.49

Date of Receipt

**02** / **14** / **2025**

**Transaction ID : SA11A.27688861**

Amount of Each Receipt this Period

1.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONLEY, MARK, , ,**

Mailing Address 4312 N. BAYWOOD DRIVE

City  
HERNANDO

State  
FL

Zip Code  
34442-6526

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

**02** / **14** / **2025**

**Transaction ID : SA11A.27689922**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONNARD, LES, , ,**

Mailing Address 372 OAKDALE DR

City  
CLAREMONT

State  
CA

Zip Code  
91711-5038

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
MANUFACTURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

**02** / **14** / **2025**

**Transaction ID : SA11A.27689335**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

210.12



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2949 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONNOLLY, DONNA, MARIE, MS.,**

Mailing Address 6881 IL REGALO CIR  
APT 112

City  
NAPLES

State  
FL

Zip Code  
34109-6818

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.46

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27688706**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONSTANTINE, RUSSELL, , ,**

Mailing Address 209 ROBIN HOOD DR

City  
COVINGTON

State  
LA

Zip Code  
70433-4762

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.66

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27688832**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORNTHWAITE, SHARON, , ,**

Mailing Address BOX 23

City  
STORY

State  
WY

Zip Code  
82842-0023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27689248**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2950 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COX, JUNE, , ,**

Mailing Address 159 NTH 4TH AVE

City  
FORSYTHState  
MTZip Code  
59327-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.74

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688019**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CROUCH, PAULINE, , ,**

Mailing Address 198 DONIZETTI DR.

City  
WESTMINSTERState  
MDZip Code  
21157-6938FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSTRUCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688264**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CUNNINGHAM, GAYLE, , MRS.,**

Mailing Address 5008 96TH STREET

City  
LUBBOCKState  
TXZip Code  
79424-4820FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688194**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2951 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURRENT, JEFFREY, , ,**

Mailing Address 96 N. 3RD. ST. , #110

City  
SAN JOSEState  
CAZip Code  
95112-7703FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689037**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURRY, ROBERT, J., ,**

Mailing Address 1205 ANDTE CIR.

City  
CLAREMOREState  
OKZip Code  
74017-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.13

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688982**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAM, BETSY, , ,**

Mailing Address 14443 MAPLEWOOD ST

City  
POWAYState  
CAZip Code  
92064-6446FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688276**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

355.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2952 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAPPER, LEE, , ,**

Mailing Address 4433 S SAUK AVE

City  
SIERRA VISTAState  
AZZip Code  
85650-8102FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688112**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DARLING, GARY, , ,**

Mailing Address 501 E GUIDRY ST

City  
COVINGTONState  
LAZip Code  
70433-3942FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689749**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEGRISSELLES, JANET, , ,**

Mailing Address 14638 SAGAMORE COURT

City  
FORT MYERSState  
FLZip Code  
33908-4912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

426.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688093**

Amount of Each Receipt this Period

7.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2953 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DELUCA, TONI, L., MS.,**Mailing Address **4684 E HEDGES AVE**City  
**FRESNO**State  
**CA**Zip Code  
**93703-4707**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**SJC INC**Occupation (for Individual)  
**COMPTROLLER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**302.65**

Date of Receipt

**02 / 14 / 2025****Transaction ID : SA11A.27688694**

Amount of Each Receipt this Period

**10.41**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DELUCA, TONI, L., MS.,**Mailing Address **4684 E HEDGES AVE**City  
**FRESNO**State  
**CA**Zip Code  
**93703-4707**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**SJC INC**Occupation (for Individual)  
**COMPTROLLER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**302.65**

Date of Receipt

**02 / 14 / 2025****Transaction ID : SA11A.27688697**

Amount of Each Receipt this Period

**9.90**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DELUCA, TONI, L., MS.,**Mailing Address **4684 E HEDGES AVE**City  
**FRESNO**State  
**CA**Zip Code  
**93703-4707**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**SJC INC**Occupation (for Individual)  
**COMPTROLLER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**302.65**

Date of Receipt

**02 / 14 / 2025****Transaction ID : SA11A.27688701**

Amount of Each Receipt this Period

**10.41**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►**30.72**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2954 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DELUCA, TONI, L., MS.,**

Mailing Address 4684 E HEDGES AVE

City  
FRESNOState  
CAZip Code  
93703-4707FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SJC INCOccupation (for Individual)  
COMPTROLLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688702**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DELUCA, TONI, L., MS.,**

Mailing Address 4684 E HEDGES AVE

City  
FRESNOState  
CAZip Code  
93703-4707FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SJC INCOccupation (for Individual)  
COMPTROLLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688709**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOANE, JIM, P., MR.,**

Mailing Address 3460 MINGLEWOOD DR.

City  
BEAUMONTState  
TXZip Code  
77703-2736FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

801.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688148**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2955 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOANE, JIM, P., MR.,**

Mailing Address 3460 MINGLEWOOD DR.

City  
BEAUMONTState  
TXZip Code  
77703-2736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688153**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOANE, JIM, P., MR.,**

Mailing Address 3460 MINGLEWOOD DR.

City  
BEAUMONTState  
TXZip Code  
77703-2736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688170**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DONOVAN, ANNE, , ,**

Mailing Address 4 WEDGE LANE

City  
SELDENState  
NYZip Code  
11784-3309FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

498.14

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688662**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

210.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2956 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNLEVY, PATRICIA, , ,**

Mailing Address 5121 BROWNSTONE DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-6028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689001**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUTCHER, MICHAEL, A., MR.,**

Mailing Address 6628 TANGLEWOOD RD

City  
SAN DIEGOState  
CAZip Code  
92111-4146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687671**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EARLPALACIO, CYNDIE, , ,**

Mailing Address 4421 WINDSONG STREET

City  
SACRAMENTOState  
CAZip Code  
95834-2510FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27690066**

Amount of Each Receipt this Period

133.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

168.21



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2957 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689483**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ECKLES, CHERYL, , ,**

Mailing Address 1310 VANTUYL DR.

City

LAWRENCE

State

KS

Zip Code

66049-3765

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687955**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EDWARDS, DALE, , MR.,**

Mailing Address 124 SE SANDSTONE DR.

City

BLUE SPRINGS

State

MO

Zip Code

64014-3812

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689538**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

252.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2958 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EDWARDS, DALE, , MR.,**

Mailing Address 124 SE SANDSTONE DR.

City  
BLUE SPRINGSState  
MOZip Code  
64014-3812FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689546**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELAS BOADO, MARIO, , ,**

Mailing Address 40120 SAGEWOOD DR

City  
PALM DESERTState  
CAZip Code  
92260-2321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.43

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27690014**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELDRIDGE, ADELE, , ,**

Mailing Address 3800 AARON COVE

City  
BARTLETTState  
TNZip Code  
38135-1929FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688070**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

185.41

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2959 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELDRIDGE, ADELE, , ,**

Mailing Address 3800 AARON COVE

City  
BARTLETT

State  
TN

Zip Code  
38135-1929

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27688208**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMMOT, WILLIAM, W., MR.,**

Mailing Address 15856 CANTRELL RD

City  
BONNER SPRINGS

State  
KS

Zip Code  
66012-7617

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27689060**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENDORF, BRUCE, , ,**

Mailing Address 312 EAST BROADWAY

City  
LEOTI

State  
KS

Zip Code  
67861-5016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
INNKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27688806**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

254.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2960 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FANNIN, SUZAN, , MS.,**

Mailing Address 5903 85TH ST

City  
LUBBOCKState  
TXZip Code  
79424-3602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689795

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FANNIN, SUZAN, , MS.,**

Mailing Address 5903 85TH ST

City  
LUBBOCKState  
TXZip Code  
79424-3602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689801

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FERRELL, RORY, , ,**

Mailing Address 4 ANGEL TRACE

City  
BRENTWOODState  
TNZip Code  
37027-8947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

271.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688920

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2961 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FITZGERALD, JOANNE, , ,**

Mailing Address P. O. BOX 3781

City  
COTTONWOODState  
AZZip Code  
86326-2606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AMERICAN AIRLINESOccupation (for Individual)  
FLIGHT ATTENDANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688606**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLACK, LUCILLE, , ,**

Mailing Address 1207 CAMPBELLAVE

City  
LYNCHBURGState  
VAZip Code  
24501-2815FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687709**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLEMING, PAT, , ,**

Mailing Address 116 BLUE SKY DRIVE

City  
SAINT JOHNSState  
FLZip Code  
32259-7369FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689156**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2962 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FOX, MICHAEL, , ,**Mailing Address 552 S RACCOON RD  
APT H18City  
YOUNGSTOWNState  
OHZip Code  
44515-3632FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688610

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FOX, MICHAEL, , ,**Mailing Address 552 S RACCOON RD  
APT H18City  
YOUNGSTOWNState  
OHZip Code  
44515-3632FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689956

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FOX, MICHAEL, , ,**Mailing Address 552 S RACCOON RD  
APT H18City  
YOUNGSTOWNState  
OHZip Code  
44515-3632FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689957

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2963 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FOX, MICHAEL, , ,**Mailing Address 552 S RACCOON RD  
APT H18City  
YOUNGSTOWNState  
OHZip Code  
44515-3632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689963**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688258**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27690111**

Amount of Each Receipt this Period

2.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2964 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRIEDKIN, MONTE, , ,**

Mailing Address 7673 WOOD DUCK DRIVE

City  
BOCA RATONState  
FLZip Code  
33434-5143FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688214

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRIEDMAN, RICHARD, , MR.,**Mailing Address 213 S WOODS MILL RD  
APT 4201City  
CHESTERFIELDState  
MOZip Code  
63017-3504FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TELEPHONE DOCTOROccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687574

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRITZ, JOHN, , MR.,**

Mailing Address P.O. BOX 3115

City  
BIG BEAR LAKEState  
CAZip Code  
92315-3115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

986.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688487

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

157.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2965 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRITZ, JOHN, , MR.,**

Mailing Address P.O. BOX 3115

City  
BIG BEAR LAKEState  
CAZip Code  
92315-3115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.67

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688507

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FUETSCH, CARL T, ,**

Mailing Address 3365 BUCKCREEK DR

City  
RENOState  
NVZip Code  
89519-8045FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688048

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FULLER, LOUIS, S., ,**

Mailing Address 9170 CHERRY HILL CT

City  
FORT MYERSState  
FLZip Code  
33908-3648FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689099

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

209.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2966 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAGNON, DONNA, , ,**

Mailing Address 2230 ANDOVER DR APT B

City  
MYRTLE BEACHState  
SCZip Code  
29575-4872FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688347

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALLAGHER, MARY, , MRS.,**

Mailing Address 647 CHEVY CHASE CIR

City  
SUGAR LANDState  
TXZip Code  
77478-3601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689796

Amount of Each Receipt this Period

108.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688679

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

153.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2967 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689114**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27690015**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688751**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2968 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GENZER, FRANK, , MR., JR.**

Mailing Address 145 SAINT JUDE STREET

City  
BILOXIState  
MSZip Code  
39530-3602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688835

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GERSEK, BARBARA, , ,**

Mailing Address 2153 ONTARIO ROAD

City  
GREEN BAYState  
WIZip Code  
54311-5016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688245

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GERSEK, BARBARA, , ,**

Mailing Address 2153 ONTARIO ROAD

City  
GREEN BAYState  
WIZip Code  
54311-5016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

311.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688248

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2969 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GERSEK, BARBARA, , ,**

Mailing Address 2153 ONTARIO ROAD

City  
GREEN BAYState  
WIZip Code  
54311-5016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688870**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GHEBREMEDHIN, BERHANE, , ,**

Mailing Address 1520 DOVE CY

City  
PASADENAState  
CAZip Code  
91107-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DPSS LA COUNTYOccupation (for Individual)  
ELIGIBILITY SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1270.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687789**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIRVIN, JOANN, , MRS.,**

Mailing Address 7110 CREEKSIDE DR.

City  
LANSINGState  
MIZip Code  
48917-9618FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

775.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689824**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2970 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLACCUM, DENIS, , MR.,**

Mailing Address P.O. BOX 82

1420 DOE RUN RD.

City  
UNIONVILLEState  
PAZip Code  
19375-0082FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688584**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLICK, LINDA LOU, , ,**

Mailing Address 2485 SUN MANOR, APT B

City  
PARADISEState  
CAZip Code  
95969-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687966**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLICK, LINDA LOU, , ,**

Mailing Address 2485 SUN MANOR, APT B

City  
PARADISEState  
CAZip Code  
95969-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

273.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689687**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.14

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2971 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GLOVER, AVERIL, , ,

Mailing Address 446 LANCASHIRE RUN

City  
SMITHFIELDState  
NCZip Code  
27577-8029FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688797

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GLOVER, AVERIL, , ,

Mailing Address 446 LANCASHIRE RUN

City  
SMITHFIELDState  
NCZip Code  
27577-8029FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688897

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOMBERG, GALINA, , ,

Mailing Address 96 CARRICK CIR.

City  
HAYWARDState  
CAZip Code  
94542-7912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1414.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27690119

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

116.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2972 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAYBASH, PETER, J., MR., JR.**

Mailing Address 4 CAMBRIDGE DR.

City  
HERSHEYState  
PAZip Code  
17033-2100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688509

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, LINCOLN, I., MR., JR.**Mailing Address 1002 ALTAVITA CT  
APT 210City  
LONGMONTState  
COZip Code  
80503-3684FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687842

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREENSTEIN, LORRAINE, , ,**

Mailing Address 162 ADAMS STREET

City  
DENVERState  
COZip Code  
80206-5239FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PROPERTY MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689865

Amount of Each Receipt this Period

18.74

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

61.74



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2973 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUDORF, KENNETH, , ,**

Mailing Address 970 CAPE MARCO DR.

City  
MARCO ISLANDState  
FLZip Code  
34145-6399FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1716.06

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687551**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAAS, RICHARD, , ,**

Mailing Address 318BOCA DEL CANON

City  
SAN CLEMENTEState  
CAZip Code  
92672-5402FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.25

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688077**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAAS, RICHARD, , ,**

Mailing Address 318BOCA DEL CANON

City  
SAN CLEMENTEState  
CAZip Code  
92672-5402FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

551.25

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688085**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2974 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAAS, RICHARD, , ,**

Mailing Address 318BOCA DEL CANON

City  
SAN CLEMENTEState  
CAZip Code  
92672-5402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688171

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAAS, RICHARD, , ,**

Mailing Address 318BOCA DEL CANON

City  
SAN CLEMENTEState  
CAZip Code  
92672-5402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688231

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAISLER, SHIRLEY, A., MS.,**

Mailing Address 1200 COWLING RD

City  
SANGERState  
TXZip Code  
76266-9084FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

307.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687999

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2975 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMBY, CAROLYN, T., MS.,**

Mailing Address 685 W KITCHEN DR.

City  
PORT NECHESState  
TXZip Code  
77651-5321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.04

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689361**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMLIN, DENNIS, , ,**

Mailing Address 18735 CORSINI DRIVE

City  
SAN ANTONIOState  
TXZip Code  
78258-1629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.04

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688546**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HANNA, SYLVIA, , ,**

Mailing Address 6109 N GALENA RD

City  
PEORIAState  
ILZip Code  
61614-3605FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.32

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689314**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2976 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANNA, SYLVIA, , ,**

Mailing Address 6109 N GALENA RD

City  
PEORIAState  
ILZip Code  
61614-3605FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.32

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689322**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARDY, RICHARD, B., MR.,**

Mailing Address 88 MASONIC HOME RD APT R313

City  
CHARLTONState  
MAZip Code  
01507-3304FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.78

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689422**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARMON, DON, , ,**

Mailing Address 1717 EPPING AVE

City  
MODESTOState  
CAZip Code  
95355-7859FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.96

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689605**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2977 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRELL, JULIE, B., MS.,

Mailing Address 3433 WESTHEIMER ROAD  
501City  
HOUSTONState  
TXZip Code  
77027-5529FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689664

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARRISON, CAROL, , ,

Mailing Address 2318 ST ELMOS FIRE

City  
DEER PARKState  
TXZip Code  
77536-4777FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687774

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARRIS, JANE, , ,

Mailing Address 108 SOUTH CONGRESS AVENUE

City  
EVANSVILLEState  
INZip Code  
47714-0208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NALLCOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

385.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689220

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

187.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2978 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRIS, MARY, , ,**

Mailing Address 118 KOPECKY ROAD

City  
SELMAState  
ALZip Code  
36701-6921FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687946

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRIS, MARY, , ,**

Mailing Address 118 KOPECKY ROAD

City  
SELMAState  
ALZip Code  
36701-6921FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687954

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARTWICK, GARY, , ,**

Mailing Address 2710 SYDNEY ST

City  
ROSWELLState  
NMZip Code  
88201-8613FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

402.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689395

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2979 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARWARD, JAMES, , ,**

Mailing Address 322 NEW KENT PLACE

City  
CARYState  
NCZip Code  
27511-4584FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688685

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEEYER, PEGGY, , ,**

Mailing Address 443 CARIBBEAN DR. E

City

SUMMERLAND KEY

State

FL

Zip Code

33042-4845

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689371

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEGWER, ELLEN, R., MS.,**

Mailing Address 76504 VIA CHIANTI

City

INDIAN WELLS

State

CA

Zip Code

92210-7808

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

607.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688742

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

153.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2980 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEGWER, ELLEN, R., MS.,**

Mailing Address 76504 VIA CHIANTI

City  
INDIAN WELLSState  
CAZip Code  
92210-7808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27690096**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEIDEMAN, JOHN, , ,**

Mailing Address 3642 DUMBARTON

City  
HOUSTONState  
TXZip Code  
77025-1944FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687992**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEIDT, HORACE, H., ,**

Mailing Address 14155 MAGNOLIA BL

City  
SHERMAN OAKSState  
CAZip Code  
91423-1112FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
HOUSING PROVIDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689631**

Amount of Each Receipt this Period

90.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

204.51



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2981 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENRY, JAMES, R., MR.,**

Mailing Address 2608 COLLEGE DRIVE

City  
VICTORIAState  
TXZip Code  
77901-4482FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE AND SECURITIES SALE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687891

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERROLD, BARBARA, J., MRS.,**

Mailing Address 3738 MARSBELLA PL

City  
KALAMAZOOState  
MIZip Code  
49006-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
K O PRODUCTSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688147

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERROLD, BARBARA, J., MRS.,**

Mailing Address 3738 MARSBELLA PL

City  
KALAMAZOOState  
MIZip Code  
49006-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
K O PRODUCTSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688674

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2982 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERSHBERGER, SHEILA, , ,**

Mailing Address 537 MELROSE ST.

City  
AKRONState  
OHZip Code  
44305-2813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMMUNITY BAPTIST CHURCHOccupation (for Individual)  
PASTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687915**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City

MOORESTOWN

State

NJ

Zip Code

08057-2931

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687856**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City

MOORESTOWN

State

NJ

Zip Code

08057-2931

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687858**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2983 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILLMAN, PATRICK, , ,**

Mailing Address 34 HUNTERSTOWN ROAD

City  
GERMANTOWNState  
NYZip Code  
12526-5604FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27690018

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HINKLE, JAMES, L., MR.,**Mailing Address 8100 CLYO RD  
# 218City  
DAYTONState  
OHZip Code  
45458-2720FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689448

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIPP, CHARLES, R., ,**

Mailing Address 4226 ROBERTS RD

City  
KERSHAWState  
SCZip Code  
29067-8761FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

333.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689288

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

123.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2984 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOISINGTON, JACKIE, , ,**

Mailing Address 2625 W RELATION ST

City  
SAFFORDState  
AZZip Code  
85546-4047FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOOPNER ENERGYOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687892

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOISINGTON, JACKIE, , ,**

Mailing Address 2625 W RELATION ST

City  
SAFFORDState  
AZZip Code  
85546-4047FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOOPNER ENERGYOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688434

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLLAR, KENNETH, , ,**

Mailing Address 120 ALLEGHANY DRIVE

City  
SALISBURYState  
NCZip Code  
28147-7229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

373.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687718

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

174.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2985 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOPKINS, GEORGE, , ,**

Mailing Address 135 CR 2984

City  
HUGHES SPRINGSState  
TXZip Code  
75656-6715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687800**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HORST, TERESA, , MRS.,**

Mailing Address 15906 HOTCHKISS VALLEY RD E

City  
LOUDONState  
TNZip Code  
37774-6069FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27690072**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOWE, ANNE, , MS.,**

Mailing Address POB61980

City  
BOULDER CITYState  
NVZip Code  
89006-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

394.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688563**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2986 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.49

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27690060**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.49

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27690061**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

734.49

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27690063**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2987 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27690073

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27690078

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

734.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27690080

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

71.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2988 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUBER, MARY, R., ,**

Mailing Address 37641 30TH STREET

City  
ELMORE

State  
MN

Zip Code  
56027-2035

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.68

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27688271**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUFFINE, VANESSA, , ,**

Mailing Address 10746 CHAMBERLAIN DRIVE

City  
IOLA

State  
TX

Zip Code  
77861-4642

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27687559**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. INABINET, DEBORAH, O., ,**

Mailing Address 4939 VICTORIA AVENUE

City  
NORTH CHARLESTON

State  
SC

Zip Code  
29405-4223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1481.01

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27688439**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

294.76



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2989 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. INABINET, DEBORAH, O., ,**

Mailing Address 4939 VICTORIA AVENUE

City  
NORTH CHARLESTONState  
SCZip Code  
29405-4223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688448

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. INABINET, DEBORAH, O., ,**

Mailing Address 4939 VICTORIA AVENUE

City  
NORTH CHARLESTONState  
SCZip Code  
29405-4223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688449

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IRICK, RICHARD, , ,**

Mailing Address 147 BARBER FARM RD

City  
JERICOState  
VTZip Code  
05465-3113FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AWIOccupation (for Individual)  
EDUCATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688049

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2990 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ISBELL, BETTYE, , ,**

Mailing Address 9806 JOHN ROLFE DR.

City  
SAN ANTONIOState  
TXZip Code  
78230-3212FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688601**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACKSON, MARLA, , ,**

Mailing Address 14959 CURRY ST

City  
MORENO VALLEYState  
CAZip Code  
92553-5019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688365**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACKSON, RUBY, , ,**Mailing Address 4413 YALE ST  
UNIT CCity  
METAIRIEState  
LAZip Code  
70006-4243FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687868**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2991 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACOBS, MICHAEL, , ,**Mailing Address 3 WHITE OAK DR.  
APT CCity  
SMITHFIELDState  
NCZip Code  
27577-4872FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688525

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACOBSON, SHARYN, , ,**

Mailing Address 4681 1ST STREET NE #401

City  
SAINT PETERSBURGState  
FLZip Code  
33703-4947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688428

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAMES, MARK, , ,**

Mailing Address 5704 SANIBEL BAY

City  
NORTH LAS VEGASState  
NVZip Code  
89031-7223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

639.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688942

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

43.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2992 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688788

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688789

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688792

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.03

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2993 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JEFFERY, ROGER, , MR.,

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688794

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JEFFERY, ROGER, , MR.,

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688800

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JEWETT, STEVEN, , ,

Mailing Address 31896 BIRCHWOOD DRIVE

City  
LAKE ELSINOREState  
CAZip Code  
92532-2628FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688725

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2994 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSTON, ALICIA, , ,**

Mailing Address 42 OLYMPIA HILLS CIRCLE

City  
LAS VEGASState  
NVZip Code  
89141-6045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FORDEL MARKETING INCOccupation (for Individual)  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688388**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, COLLEEN, , ,**

Mailing Address 541 RIVERVIEW DR. NW

City  
SALEMState  
ORZip Code  
97304-4338FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CAPITAL MANOROccupation (for Individual)  
CAREGIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689836**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, PHIL, , MR.,**

Mailing Address 488 BRACKENWOOD LANE S

City  
PALM BEACH GARDENSState  
FLZip Code  
33418-9052FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VAPORSHIELDOccupation (for Individual)  
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1357.75

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687931**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

364.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2995 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, PHIL, , MR.,**

Mailing Address 488 BRACKENWOOD LANE S

City  
PALM BEACH GARDENSState  
FLZip Code  
33418-9052FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VAPORSHIELDOccupation (for Individual)  
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1357.75

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689401**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGSState  
IDZip Code  
83276-1671FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.88

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687941**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, HOWARD, R., MR.,**

Mailing Address 5626 FOREST GLEN DR

City  
GROVE CITYState  
OHZip Code  
43123-9413FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.58

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688822**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2996 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, JEANNETTE, , ,**

Mailing Address 873 CRESTVIEW CIRCLE

City  
FORT LAUDERDALEState  
FLZip Code  
33327-1847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.80

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687570**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, JOHN, W., MR.,**

Mailing Address 3927 N FLORENCE BLVD

City  
FLORENCEState  
AZZip Code  
85132-8403FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.80

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687777**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, KARON, , ,**

Mailing Address 1345 165TH ST

City  
FORT SCOTTState  
KSZip Code  
66701-8344FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.14

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688059**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

169.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2997 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, KARON, , ,**

Mailing Address 1345 165TH ST

City  
FORT SCOTTState  
KSZip Code  
66701-8344FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.14

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689891**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOYCE, RICHARD, , ,**Mailing Address 1350 E NORTH ST  
LOT 84City  
CROWN POINTState  
INZip Code  
46307-6400FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.31

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688763**

Amount of Each Receipt this Period

2.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KACZMAREK, DEBORAH, , ,**

Mailing Address 2729 SW 124TH TER

City  
OKLAHOMA CITYState  
OKZip Code  
73170-4760FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

261.10

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687860**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2998 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687970**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEINATH, WARREN, C., ,**

Mailing Address 24 RAVENS POINTE DR.

City  
LAKE SAINT LOUISState  
MOZip Code  
63367-2238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689355**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KELLER, DOUGLAS, , ,**

Mailing Address 2238 KINGSTON ROAD

City  
GRAND JUNCTIONState  
COZip Code  
81507-1222FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689939**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2999 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KELLY, ERNEST, G., MR., JR.**

Mailing Address 219 ANGELUS

City  
MEMPHISState  
TNZip Code  
38112-5201FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

965.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688395

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEMMERER, JOHN, L., MR., III**

Mailing Address PO BOX 6848

City  
JACKSONState  
WYZip Code  
83002-6848FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KEMMERER MANAGEMENT CORP.Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689568

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KENYON, TONI, , ,**

Mailing Address 83 CONCORD RD

City  
BEDFORDState  
MAZip Code  
01730-2036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

982.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687852

Amount of Each Receipt this Period

208.20

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5308.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3000 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KERR, KAT, , ,**

Mailing Address P O BOX 550989

City  
JACKSONVILLEState  
FLZip Code  
32255-0989FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTHOR SPEAKER PROPHET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688314**

Amount of Each Receipt this Period

14.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNOX, DONNA, , ,**

Mailing Address 5055 W C30A # 1016

City  
SANTA ROSA BEACHState  
FLZip Code  
32459-4373FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688856**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOHLER, PATTI, , ,**

Mailing Address 105 CRAWLEY ST

City  
HUGHESVILLEState  
PAZip Code  
17737-1205FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

380.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689353**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3001 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KORFF, PHILLIP, , ,**

Mailing Address 3250 FOOP

City  
ROOP ROADState  
CAZip Code  
95020-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688117

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KORZNIECKI, LOU, , ,**

Mailing Address P.O. BOX 308

City  
RONKSState  
PAZip Code  
17572-0308FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

616.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689223

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUHN, ROBERT, , ,**

Mailing Address 3718 LANGTRY DR

City  
AMARILLOState  
TXZip Code  
79109-3926FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

936.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688102

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

240.54

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3002 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.91

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688715**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.91

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27690133**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LACKEY, ANN, , ,**

Mailing Address 1117 SPRUCE STREET

City  
LAKE OSWEGOState  
ORZip Code  
97034-6153FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

219.48

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689671**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3003 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANE, DAVINA, , ,**

Mailing Address 11323 PACIFIC ST.

City  
COLUMBIAState  
CAZip Code  
95310-9603FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689019

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LARIS, RUDY, , ,**

Mailing Address 111 VACHERIE ST

City  
LOCKPORTState  
LAZip Code  
70374-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689634

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAYNE, GLORIA, C., ,**

Mailing Address 1766 BAY ISLE DR.

City  
POINT PLEASANT BORState  
NJZip Code  
08742-5212FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

416.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688165

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3004 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LESSY JR, ROY, , ,**

Mailing Address 64 BLACKPOOL RD

City  
REHOBOTH BEACHState  
DEZip Code  
19971-3511FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689485

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKERState  
COZip Code  
80138-8221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687742

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKERState  
COZip Code  
80138-8221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687743

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

44.90



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3005 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKERState  
COZip Code  
80138-8221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687744**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKERState  
COZip Code  
80138-8221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687745**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKERState  
COZip Code  
80138-8221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687746**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3006 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKERState  
COZip Code  
80138-8221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687750**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689446**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LIN, MATTHEW, , ,**

Mailing Address 1050 OAK GROVE AVE

City  
SAN MARINOState  
CAZip Code  
91108-1026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687756**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3007 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIN, MATTHEW, , ,**

Mailing Address 1050 OAK GROVE AVE

City  
SAN MARINOState  
CAZip Code  
91108-1026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.50

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688313**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIN, MATTHEW, , ,**

Mailing Address 1050 OAK GROVE AVE

City  
SAN MARINOState  
CAZip Code  
91108-1026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.50

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688318**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINNETTZ, RONALD, , ,**

Mailing Address 2483 S CALLE DEL DANTE

City  
GREEN VALLEYState  
AZZip Code  
85622-8276FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.10

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689304**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3008 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIPTAK, DAVID, J., MR.,**

Mailing Address 488 MADISON AVE 21ST FLOOR

City  
NEW YORKState  
NYZip Code  
10022-5702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPRING STREET PARTNERSOccupation (for Individual)  
INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688320**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LLEWELLYN, BILLY, , ,**

Mailing Address 16157 POUNCEY TRACT RD.

City  
ROCKVILLEState  
VAZip Code  
23146-1909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OLD TIME BUILDER INC.Occupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689341**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688943**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3009 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOHR, STONY, , MS.,**

Mailing Address 105 BATTERY WAY

City  
PEACHTREE CITYState  
GAZip Code  
30269-2139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687648

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOHR, STONY, , MS.,**

Mailing Address 105 BATTERY WAY

City  
PEACHTREE CITYState  
GAZip Code  
30269-2139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688090

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LORENZ, ALONAH, , MS.,**

Mailing Address 160 40TH AVE SE

City  
BENSONState  
MNZip Code  
56215-1358FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689227

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3010 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LORENZ, ALONAH, , MS.,**

Mailing Address 160 40TH AVE SE

City  
BENSONState  
MNZip Code  
56215-1358FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689237

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689698

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689701

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

22.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3011 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LYONS, GEORGE, , ,**

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534-5242FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1658.27

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688429**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LYSTIG, CAROLYN, , ,**

Mailing Address 2155 6TH LANE SE, APT 206

City  
CAMBRIDGEState  
MNZip Code  
55008-2528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.58

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688951**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MA, HOMER, , ,**

Mailing Address 1819 HAPP RD

City  
NORTHBROOKState  
ILZip Code  
60062-5640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688908**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3012 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACARIO, KELLI, , ,**

Mailing Address 27136 SOUTH INDIAN ROAD

City  
PARK HILLState  
OKZip Code  
74451-3022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689923**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACHADO, LEONARD, , ,**

Mailing Address 21520 G YORBA LINDA BLVD

City  
YORBA LINDAState  
CAZip Code  
92887-3764FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688424**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACKAIG, RICHARD, A., MR.,**Mailing Address 25422 SEA BLUFFS DR  
UNIT 208City  
DANA POINTState  
CAZip Code  
92629-2194FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687555**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

132.73



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3013 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACKENZIE, THOMAS, S., MR.,**

Mailing Address 16635 W SHERIDAN ST

City  
GOODYEARState  
AZZip Code  
85395-1905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687791**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MADDIX, JOYE, , ,**

Mailing Address 4065 WEST GRANDVIEW ROAD

City  
SALEMState  
INZip Code  
47167-8274FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PROVIDENCEOccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689809**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MADRIGAL, LINDA, , ,**

Mailing Address 416 SOUTHEAST OLD WEST HIGHWAY

City  
DUNCANState  
AZZip Code  
85534-0600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689916**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

230.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3014 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MADSEN, ANDREW, H., ,**

Mailing Address 2901 SPRINGFIELD ROAD

City  
BROOMALLState  
PAZip Code  
19008-1308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MADSEN INCOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.02

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689234**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAKI, NEIL, J., DR.,**

Mailing Address 103 W 4TH ST

City  
THIBODAUXState  
LAZip Code  
70301-3107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689958**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANSOUR, ALFRED, A., DR.,**

Mailing Address 3771 BELLAIRE BLVD

City  
HOUSTONState  
TXZip Code  
77025-1206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ACCESS RADIOLOGYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

847.19

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688913**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.88

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3015 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARGULIES, CORINNE, , ,**

Mailing Address 303 E 57TH STREET - APT 43B

City  
NEW YORK

State  
NY

Zip Code  
10022-2693

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864.00

Date of Receipt

02 / 14 / 2025

**Transaction ID : SA11A.27689198**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARKLEY, BARBARA, , ,**

Mailing Address 330 ALESSANDRA CIRCLE

City  
ORANGE CITY

State  
FL

Zip Code  
32763-7859

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.45

Date of Receipt

02 / 14 / 2025

**Transaction ID : SA11A.27688175**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARKLEY, BARBARA, , ,**

Mailing Address 330 ALESSANDRA CIRCLE

City  
ORANGE CITY

State  
FL

Zip Code  
32763-7859

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

689.45

Date of Receipt

02 / 14 / 2025

**Transaction ID : SA11A.27689281**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

204.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3016 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARLATT, MICHAEL, , ,**

Mailing Address P.O. BOX 1299

City  
RIVERSIDEState  
CAZip Code  
92502-1299FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THOMPSON COLEGATEOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687869**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, MICHAEL, , MR.,**

Mailing Address 3529 CHEDDINGTON LN

City  
LEXINGTONState  
KYZip Code  
40502-3038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688486**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

464.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687763**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3017 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689337

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689159

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

832.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689889

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3018 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATULA, LOIS, , ,**

Mailing Address 580 FREEMAN LANE

City  
LA VERNIAState  
TXZip Code  
78121-2102FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SALES ASSOCIATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688824**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MC DONALD, MELODY, L., MRS.,**

Mailing Address 1098 VERNIER PLACE

City  
STANFORDState  
CAZip Code  
94305-1027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689035**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCOY, CINDY, C., MS.,**

Mailing Address 8608, CALERA DRIVE

City  
AUSTINState  
TXZip Code  
78735-1570FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689770**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

42.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3019 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCOY, CINDY, C., MS.,**

Mailing Address 8608, CALERA DRIVE

City  
AUSTINState  
TXZip Code  
78735-1570FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689773

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCOY, CINDY, C., MS.,**

Mailing Address 8608, CALERA DRIVE

City  
AUSTINState  
TXZip Code  
78735-1570FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689777

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCOY, CINDY, C., MS.,**

Mailing Address 8608, CALERA DRIVE

City  
AUSTINState  
TXZip Code  
78735-1570FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

503.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689782

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3020 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCDONNOLD, MUCKLEROY, , , JR.**

Mailing Address 1609 STANOLIND AVENUE

City  
MIDLANDState  
TXZip Code  
79705-8652FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688639**

Amount of Each Receipt this Period

198.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCELREATH, JAMES, , ,**

Mailing Address 1701SHADYDIDE

City  
EAST LIVERPOOLState  
OHZip Code  
43920-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687738**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCFERRIN, JAMES, W., MR.,**

Mailing Address 125 BEVERLY ROAD NE

City  
ATLANTAState  
GAZip Code  
30309-2655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
U. S. ELECTRICOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689565**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

242.50



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3021 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCGRAW, MICHAEL, , ,**

Mailing Address 5305 SUMTER LANE

City  
SPRINGFIELDState  
ILZip Code  
62711-7415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.04

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689069**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCMULLEN, TIMOTHY, , ,**

Mailing Address 17 BAIER DR.

City  
ROCHESTERState  
NYZip Code  
14606-5311FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.36

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688813**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCNAMEE, PHILIP, , ,**

Mailing Address 18612 HARMONY ROAD

City  
MARENGOState  
ILZip Code  
60152-9538FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688292**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

218.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3022 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MELLINGER, DENNIS, , ,**

Mailing Address 1425 TX HWY 16 NORTH

City  
BANDERAState  
TXZip Code  
78003-0209FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27690012**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MERIWETHER, NORMA, C., MS.,**

Mailing Address 28 LOST POND

City  
NELLYSFORDState  
VAZip Code  
22958-8004FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689898**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERKEL, GREG, , ,**

Mailing Address 729 RT3

City  
GAMBRILLSState  
MDZip Code  
21054-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LEOSOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

598.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689083**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3023 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. METHENY, WILLIAM, , ,**

Mailing Address P.O. BOX 414

City  
BRIDGERState  
MTZip Code  
59014-0414FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689935**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MICHELS, MARY, E., MS.,**

Mailing Address 8001 BROOKS LOOP

City  
SPEARFISHState  
SDZip Code  
57783-6307FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688543**

Amount of Each Receipt this Period

110.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, JANE, R., MRS.,**

Mailing Address 1279 PEACHTREE BATTLE AVE. NW

City  
ATLANTAState  
GAZip Code  
30327-1443FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689788**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

186.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3024 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMERE

State  
FL

Zip Code  
34786-8012

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
QUEST DIAGNOSTICS

Occupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.16

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27687958**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMERE

State  
FL

Zip Code  
34786-8012

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
QUEST DIAGNOSTICS

Occupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.16

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27689452**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMERE

State  
FL

Zip Code  
34786-8012

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
QUEST DIAGNOSTICS

Occupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.16

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27689459**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3025 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOBLEY, ANNA, , ,**

Mailing Address 3528 E SHEFFIELD WAY

City  
SPRINGFIELDState  
MOZip Code  
65802-2443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689386**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOBLEY, ROBERT, , MR.,**

Mailing Address 29823 KENTUCKY AVE

City  
MAGNOLIAState  
TXZip Code  
77354-2168FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.50

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688324**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOCK, WILLIAM, , ,**

Mailing Address 923 6TH AVENUE

City  
ALBANYState  
GAZip Code  
31701-1742FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.88

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689934**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.09

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3026 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONACO, DON, , MR.,**

Mailing Address 7617 SPY GLASS DR.

City  
MODESTO

State  
CA

Zip Code  
95356-9583

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27687597**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLAND

State  
SC

Zip Code  
29492-7463

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27689732**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTENEGRO, RAUL, , ,**

Mailing Address 1017 MONTICELLO BLVD N

City  
ST PETERSBURG

State  
FL

Zip Code  
33703-4503

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

263.75

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27689880**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

282.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3027 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOORMAN, FRANCES, S., MRS.,**

Mailing Address 11207 BUSHIRE DRIVE

City  
DALLASState  
TXZip Code  
75229-4106FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688327**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORARIU, M, ALBIN, ,**

Mailing Address 5258 LINTON BLV # 101

City  
DELRAY BEACHState  
FLZip Code  
33484-6564FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FNCOccupation (for Individual)  
NEUROLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688501**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRIS, GEORGE, S., MR.,**

Mailing Address P.O. BOX 3698

City  
PINETOPState  
AZZip Code  
85935-3698FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

246.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687617**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

181.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3028 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOSS, LOGAN, , ,**

Mailing Address 16615 LA CATANIA WAY

City  
AUSTINState  
TXZip Code  
78738-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687880

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOSS, LOGAN, , ,**

Mailing Address 16615 LA CATANIA WAY

City  
AUSTINState  
TXZip Code  
78738-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687890

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOSS, LOGAN, , ,**

Mailing Address 16615 LA CATANIA WAY

City  
AUSTINState  
TXZip Code  
78738-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687894

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.31



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3029 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOSS, LOGAN, , ,**

Mailing Address 16615 LA CATANIA WAY

City  
AUSTINState  
TXZip Code  
78738-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687897

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOURAD, ANTHONY, , ,**Mailing Address 1355 S PORTOFINO DR.  
APT 101City  
SARASOTAState  
FLZip Code  
34242-3140FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689521

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOYER, JOHN, , ,**Mailing Address 525 SOUTH MAIN ST  
SUITE 700City  
TULSAState  
OKZip Code  
74103-4508FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROSENSTEIN, FIST & RINGOLDOccupation (for Individual)  
ROSENSTEIN, FIST & RINGOLD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

331.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687636

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3030 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688237**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURRAY, RICHARD, , ,**

Mailing Address 648 E STARK DR.

City  
PALATINEState  
ILZip Code  
60074-3800FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688144**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEAT, KAREN, , ,**

Mailing Address 2002 APPLESEED DR

City  
ALLENState  
TXZip Code  
75013-4894FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

816.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688950**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64.71

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3031 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEGRON, RAMON, A., MR.,**

Mailing Address 203 PRESIDENTE RAMIREZ ST

City  
SAN JUANState  
PRZip Code  
00918-4319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ICPR JUNIOR COLLEGEOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689274

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, PAUL, , ,**

Mailing Address 6803 NORTH 68TH PLAZA

City  
OMAHAState  
NEZip Code  
68152-2177FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688294

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, PAUL, , ,**

Mailing Address 6803 NORTH 68TH PLAZA

City  
OMAHAState  
NEZip Code  
68152-2177FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689553

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3032 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEUHOFF, PAUL, , ,**

Mailing Address 2918 MARSHALL BOULEVARD

City  
SULLIVANS ISLANDState  
SCZip Code  
29482-9637FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GSP MARKETING TECHNOLOGYOccupation (for Individual)  
FOUNDER /CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689971**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEVES, RICHARD, , ,**

Mailing Address 737 DANE CT

City  
HEMETState  
CAZip Code  
92543-1785FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689364**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NGUYEN, TOAN, , ,**

Mailing Address 472 ILCREST DR.

City  
HOUSTONState  
TXZip Code  
77042-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688075**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

201.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3033 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NIEMANN, NANCY, , ,**

Mailing Address 18 DOGWOOD RD.

City  
MORRIS PLAINSState  
NJZip Code  
07950-1919FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

853.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689713**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NINCENSKI-SATTERFIELD, JUDITH, , ,**

Mailing Address 1549 DUNDEE DR.

City  
NEW HAVENState  
INZip Code  
46774-2215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688464**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NORRIS, DANIEL, , ,**

Mailing Address 22680 CEDAR LANE CT. APT. 3408

City  
LEONARDTOWNState  
MDZip Code  
20650-3933FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

363.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689609**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3034 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NORTON, PATRICIA, , ,**

Mailing Address 167 CHURCH STREET. P.O. BOX 144

City  
MARION JUNCTIONState  
ALZip Code  
36759-0144FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.25

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688830**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NORTON, PATRICIA, , ,**

Mailing Address 167 CHURCH STREET. P.O. BOX 144

City  
MARION JUNCTIONState  
ALZip Code  
36759-0144FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.25

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688846**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

589.96

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689839**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3035 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OBERLENDER, JANICE, , ,**

Mailing Address 5533 PRESTWICK LANE

City  
DALLAS

State  
TX

Zip Code  
75252-4978

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

959.56

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27688591**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OBERLENDER, JANICE, , ,**

Mailing Address 5533 PRESTWICK LANE

City  
DALLAS

State  
TX

Zip Code  
75252-4978

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

959.56

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27688605**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ODOM, HELEN, , ,**

Mailing Address 1723 DONNA LYNN DR SE

City  
SMYRNA

State  
GA

Zip Code  
30080-2411

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.64

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27689245**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

137.42

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3036 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ODOM, HELEN, , ,**

Mailing Address 1723 DONNA LYNN DR SE

City  
SMYRNAState  
GAZip Code  
30080-2411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689261

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ODUM, FREIDA, L., MS.,**

Mailing Address 1136 DEAN FOREST RD

City  
SAVANNAHState  
GAZip Code  
31405-9304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689432

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688101

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.32



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3037 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAGEL, ANITA, , ,**

Mailing Address 100 NORTH OLIVE STREET

City  
SAINT ELMOState  
ILZip Code  
62458-1443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PAGEL FUNERAL HOMESOccupation (for Individual)  
FUNERAL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688351**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PALOPOLI, FRANK, C., MR.,**Mailing Address 490 NORRISTOWN RD  
STE 252City  
BLUE BELLState  
PAZip Code  
19422-2350FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FCP GROUP LLCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688600**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PANDINA, ANTHONY, , ,**

Mailing Address 20413 NE 161ST ST

City  
BRUSH PRAIRIEState  
WAZip Code  
98606-6707FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

296.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688056**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

318.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3038 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PANDINA, ANTHONY, , ,**

Mailing Address 20413 NE 161ST ST

City  
BRUSH PRAIRIEState  
WAZip Code  
98606-6707FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.70

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688062**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARKER, BRUCE, E., ,**

Mailing Address 320 IVYWOOD LANE

City  
NAPLESState  
FLZip Code  
34112-7239FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688322**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKS, JENNIE, , ,**

Mailing Address 386 W TROXELL RD

City  
OAK HARBORState  
WAZip Code  
98277-7909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

521.93

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688375**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3039 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARKS, JENNIE, , ,**

Mailing Address 386 W TROXELL RD

City  
OAK HARBORState  
WAZip Code  
98277-7909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.93

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688409**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.76

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688160**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.76

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688659**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3040 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PECORA, SANDRA, J., MRS.,**

Mailing Address 20 EDGEWATER CT

City  
WAKEMANState  
OHZip Code  
44889-9082FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688436

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688693

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689651

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3041 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PHILLIPS, MYRON, G., MR.,**

Mailing Address 18805 86TH PL W

City  
EDMONDSState  
WAZip Code  
98026-5907FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689545**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687675**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688262**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3042 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689285**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIERCE, ARLENE, , ,**

Mailing Address 4931 ELMGATE DR.

City  
ORCHARD LAKEState  
MIZip Code  
48324-3012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689387**

Amount of Each Receipt this Period

56.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIERCE, HAROLD, , ,**

Mailing Address 2424 CAPTAIN COOK DRIVE

City  
ANCHORAGEState  
AKZip Code  
99517-1279FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688467**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

191.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3043 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PILKINGTON, CURT, , MR.,**

Mailing Address 226 S SECOND ST.

City  
STERLINGState  
COZip Code  
80751-4217FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CURT PILKINGTONOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1024.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687736

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PISTORINO, MARIA, , MS.,**

Mailing Address 6535 SW 123RD STREET

City  
PINECRESTState  
FLZip Code  
33156-5554FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

983.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688410

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PLANK, HEATHER, , ,**

Mailing Address PO BOX 5082

City  
SHERIDANState  
WYZip Code  
82801-1382FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

903.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688111

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

192.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3044 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PLANK, HEATHER, , ,**

Mailing Address PO BOX 5082

City  
SHERIDANState  
WYZip Code  
82801-1382FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

903.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688114

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PLUNKETT, LEE, W., DR.,**

Mailing Address 8340 KENNINGSTON WAY

City  
DULUTHState  
GAZip Code  
30097-1667FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688724

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687607

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.13



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3045 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POLLARD, ANN, , ,**

Mailing Address 13 INDIGO DR

City  
LAKE PLACIDState  
FLZip Code  
33852-6177FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687601**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POMEROY, PATTI, , ,**

Mailing Address 902 SILVER ST

City  
PRINCETONState  
TXZip Code  
75407-2281FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689973**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PORTER, LISABETH, , ,**

Mailing Address 185 MIDDLE ROAD

City  
MONTECITOState  
CAZip Code  
93108-2448FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689054**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3046 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689555

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689940

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POWELL, THOMAS, , MR.,**

Mailing Address P.O. BOX 300

City  
GIDDINGSState  
TXZip Code  
78942-0300FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688735

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

164.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3047 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PREMO, TERRY, , ,**

Mailing Address 1409 EVERGREEN PARK DR. SW - 301

City  
OLYMPIAState  
WAZip Code  
98502-5827FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688877**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRESLEY, JUANITA, , MS.,**

Mailing Address 4115 E. CLOCKTOWER LANE, APT. 246

City  
MERIDIANState  
IDZip Code  
83642-4742FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.53

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689122**

Amount of Each Receipt this Period

29.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRESTON, BRADLEY, B., MR.,**

Mailing Address 2109 SOMMER ST

City  
NAPAState  
CAZip Code  
94559-4306FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

349.93

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688617**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3048 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688673

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688690

Amount of Each Receipt this Period

5.01

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688726

Amount of Each Receipt this Period

5.22

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

18.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3049 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PURDON, THOMAS, F., MR.,**

Mailing Address 8550 W CONTINENTAL DR

City  
PEORIAState  
AZZip Code  
85382-2702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687554

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688326

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RADY, PAUL, M., MR.,**

Mailing Address 4 MOCKINGBIRD LN

City  
ENGLEWOODState  
COZip Code  
80113-4813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANTERO RESOURCESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

8901.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687830

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3050 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAMEY, KEN, , ,**

Mailing Address 998 COUNTY ROAD 76

City  
ALTURASState  
CAZip Code  
96101-7777FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27690008

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RANALLO, JINGER, , ,**

Mailing Address 813 LEEDS STREET

City  
BAKERSFIELDState  
CAZip Code  
93311-1144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689213

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RANDALL, WAYNE, C., MR.,**

Mailing Address 19857 GREENVIEW DR.

City  
WOODBIDGEState  
CAZip Code  
95258-9231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNITED PALLET SERVICES, INC.Occupation (for Individual)  
PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688978

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

131.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3051 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. READ, JEAN, , ,**

Mailing Address 367 RED #ROCK ROAD

City  
WICHITA FALLSState  
TXZip Code  
76305-2817FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689479**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REAGAN, RONALD, C., ,**

Mailing Address 1783 FOUR MILE COVE PKWY

City  
CAPE CORALState  
FLZip Code  
33990-2409FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.95

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687722**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REID, LENA, , ,**

Mailing Address 5720 GAGER AVE

City  
NORTH PORTState  
FLZip Code  
34291-4892FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688095**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3052 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RENTOF, PETER, , ,**Mailing Address 235 EAST 22ND STREET  
7DCity  
NEW YORKState  
NYZip Code  
10010-4635FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.33

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27690056**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688061**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688125**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.52



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3053 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688380

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688382

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689150

Amount of Each Receipt this Period

0.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3054 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689160**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689046**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689047**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3055 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689050

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689055

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689064

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3056 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689067

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689071

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689079

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 3057 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689133**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689147**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBERTSMATSUO, MARY, , ,**

Mailing Address 903 WAIHOLO STREET

City  
HONOLULUState  
HIZip Code  
96821-1225FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

314.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689005**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

32.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3058 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, DALE, , ,**

Mailing Address 104 BRANNON LANE

City  
TROYState  
ALZip Code  
36079-8203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689235

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City

SAN DIEGO

State

CA

Zip Code

92130-2456

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689138

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City

SAN DIEGO

State

CA

Zip Code

92130-2456

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27690070

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

9.16

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3059 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORD

State  
NH

Zip Code  
03301-5847

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27689412**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORD

State  
NH

Zip Code  
03301-5847

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27689745**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORD

State  
NH

Zip Code  
03301-5847

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27689789**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3060 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687909

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688068

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688878

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.25



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3061 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUMBAUGH, EMILY, , ,**

Mailing Address 176 RIDGEDALE

City  
RIDGEDALEState  
MOZip Code  
65739-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BONOBO HOPEOccupation (for Individual)  
RESEARCH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688383

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVERState  
NJZip Code  
08882-1908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687603

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RYAN, LARRY, , ,**

Mailing Address 18 CINDER COURT

City  
SACRAMENTOState  
CAZip Code  
95831-2738FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688512

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

138.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3062 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RYAN, ROBERT, C., MR.,**

Mailing Address 95 RIMFIRE CIRCLE

City  
RENOState  
NVZip Code  
89519-2989FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOLLAND & HART LLPOccupation (for Individual)  
PATENT & IP ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688656

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SACHNOFF, BRUCE, , ,**

Mailing Address 126 FIELD CLUB ROAD

City

PITTSBURGH

State

PA

Zip Code

15238-2238

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

694.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687976

Amount of Each Receipt this Period

70.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SACHNOFF, BRUCE, , ,**

Mailing Address 126 FIELD CLUB ROAD

City

PITTSBURGH

State

PA

Zip Code

15238-2238

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

694.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687981

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

224.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3063 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SALAT, ERIC, , ,**Mailing Address 14 HORATIO STREET  
5DCity  
NEW YORKState  
NYZip Code  
10014-1666FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688299

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAPOZNIK, RACHEL, , ,**Mailing Address 100 WOOD AVE S  
FL 4City  
ISELINState  
NJZip Code  
08830-2716FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SAPOZNIK INSURANCEOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27690105

Amount of Each Receipt this Period

495.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SARBA, BARRY, , ,**

Mailing Address 435 BATTLE DR.

City  
FANNINState  
TXZip Code  
77960-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

338.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688215

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

578.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3064 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAVAGE, SYLVIA, , ,**Mailing Address 3100 UTICA SELLERSBURG RD  
APT 201City  
JEFFERSONVILLEState  
INZip Code  
47130-0031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687656**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHABEL, REBECCA, , ,**

Mailing Address 5 NORTH HIGHWAY 101

City  
WARRENTONState  
ORZip Code  
97146-9313FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689414**

Amount of Each Receipt this Period

475.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHIELDS, GARY, , ,**

Mailing Address 603 MAIN ST

City  
GOODLANDState  
KSZip Code  
67735-1843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

505.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688940**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

603.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3065 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLEIFFARTH, KAREN, , MS.,**

Mailing Address 1232 DUTCH FIELDS PKWY

City  
MIDWAYState  
UTZip Code  
84049-6931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688688

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City

MONROE TOWNSHIP

State

NJ

Zip Code

08831-5978

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687845

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City

MONROE TOWNSHIP

State

NJ

Zip Code

08831-5978

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688352

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3066 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLOUGH, JAMES, , ,**

Mailing Address 3810 CHURCH HILL

City  
CRYSTAL LAKEState  
ILZip Code  
60014-6511FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689894

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHNEEGASS, GEORGE, F., MR.,**

Mailing Address 3675 MOUNTAIN DR.

City  
COLORADO SPRINGSState  
COZip Code  
80918-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

634.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687627

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHWARZ, GENE, , ,**

Mailing Address 521 8TH AVE NW

City  
WASECAState  
MNZip Code  
56093-2335FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687641

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

74.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3067 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHWARZ, GENE, , ,**

Mailing Address 521 8TH AVE NW

City  
WASECAState  
MNZip Code  
56093-2335FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687659**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCULLY, MARLYNN, V., ,**

Mailing Address 771 MANATEE COVE

City  
VERO BEACHState  
FLZip Code  
32963-3730FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27690041**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEGRAVES, GILDA, G., ,**

Mailing Address 14236 S SWAN RD

City  
GULFPORTState  
MSZip Code  
39503-9073FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

661.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689292**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3068 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEITER, JOHN, H., MR.,**

Mailing Address 3293 PADARO LN

City  
CARPINTERIAState  
CAZip Code  
93013-1116FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1166.96

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687896**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEITER, JOHN, H., MR.,**

Mailing Address 3293 PADARO LN

City  
CARPINTERIAState  
CAZip Code  
93013-1116FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1166.96

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687898**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEITER, JOHN, H., MR.,**

Mailing Address 3293 PADARO LN

City  
CARPINTERIAState  
CAZip Code  
93013-1116FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1166.96

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687904**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.54



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3069 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SELIGER, PENNY, , MRS.,**

Mailing Address 1020 BENTREE CIRCLE

City  
ANCHORAGEState  
AKZip Code  
99504-1700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689058**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SELIGER, PENNY, , MRS.,**

Mailing Address 1020 BENTREE CIRCLE

City  
ANCHORAGEState  
AKZip Code  
99504-1700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689072**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEPHTON, GAYLE, , ,**

Mailing Address 150E LAKESHORE DR. #72

City  
LAKE ELSINOREState  
CAZip Code  
92530-4241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

565.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688186**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

191.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3070 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEPHTON, GAYLE, , ,**

Mailing Address 150E LAKESHORE DR. #72

City  
LAKE ELSINOREState  
CAZip Code  
92530-4241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688191**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEPHTON, GAYLE, , ,**

Mailing Address 150E LAKESHORE DR. #72

City  
LAKE ELSINOREState  
CAZip Code  
92530-4241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688200**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEPULVADO, WILNA, , MS.,**

Mailing Address 8709 GLENMORA DRIVE

City  
SHREVEPORTState  
LAZip Code  
71106-6234FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

273.95

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689514**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3071 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SERBIA, VICTORIA, C., ,

Mailing Address 4304 HORACE DR. NW

City  
HUNTSVILLEState  
ALZip Code  
35816-3518FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688416

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SEXTON, STEPHEN, M., MR.,

Mailing Address 2728 IRON CT

City  
FREMONTState  
NEZip Code  
68025-6167FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689895

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHEDLOCK, JOHN, , ,

Mailing Address 10089 IRON MOUNTAIN CT

City  
RANCHO CUCAMONGAState  
CAZip Code  
91737-6831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687781

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

63.50

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3072 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688340

Amount of Each Receipt this Period

1.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689877

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689878

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

21.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3073 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689883**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOOP, BEV, , ,**

Mailing Address 843 N. WOODLAWN AVE.

City  
KIRKWOODState  
MOZip Code  
63122-2949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.57

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688254**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHUE, TOM, , ,**

Mailing Address 1707 STEAMBOAT DRIVE

City  
HENDERSONState  
NVZip Code  
89014-4086FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REPUBLIC ELECTRICOccupation (for Individual)  
WAREHOUSE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689350**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3074 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHUGER, JILL, , ,**

Mailing Address N7756 BUSHEY RD

City  
TREGOState  
WIZip Code  
54888-9327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689354

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SICA, SUSAN, , ,**

Mailing Address 6021 E SMOKEHOUSE TRL

City

SCOTTSDALE

State

AZ

Zip Code

85266-8204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689517

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SKILLRUD, GENE, , ,**

Mailing Address 15609 VISTA GRANDE

City

HELOTES

State

TX

Zip Code

78023-3810

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689560

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

213.20

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3075 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLACK, PAMELA, W., ,**

Mailing Address 3696 N. CHINA RD.

City  
BEAUMONTState  
TXZip Code  
77713-3394FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687957**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, CHRIS, , ,**

Mailing Address 2082 WILLOW BEACH

City  
KEEGO HARBORState  
MIZip Code  
48320-1210FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.09

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689660**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, DANIEL, G., MR.,**Mailing Address 7 WOODBINE RD  
APT 100City  
FLORHAM PARKState  
NJZip Code  
07932-2649FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

533.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687569**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3076 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, MARY, L., ,**

Mailing Address 2939 QUENLEY ST

City  
SAINT CHARLESState  
MOZip Code  
63301-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689771**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689199**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689278**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.85



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3077 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, VICKI, , ,

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689987

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SNEARLY, MARTHA, D., MS.,

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689187

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SNEARLY, MARTHA, D., MS.,

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689218

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3078 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27690091**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SNYDER, LEE, , ,**

Mailing Address 279 LONE OAK ROAD

City  
RANSONState  
WVZip Code  
25438-5614FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SNYDER ENVIRONMENTALOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688423**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687694**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

193.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3079 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SORRENTINO, BOB, , ,**

Mailing Address 75161 SEGO LANE, E-1

City  
PALM DESERTState  
CAZip Code  
92211-5156FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689601**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOSNICK, NIKKE, R., MS.,**

Mailing Address 510 PAJARO CT

City  
SACRAMENTOState  
CAZip Code  
95864-7229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DESIGNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688109**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687632**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3080 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687634**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687638**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STALNAKER, BEN, , DR.,**

Mailing Address 10424 TAM O SHANTER RD

City  
PENSACOLAState  
FLZip Code  
32514-8305FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.75

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689834**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

28.23

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3081 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEAD, LINDA, , ,

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687612

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEAD, LINDA, , ,

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27687615

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STILLWELL, KAREN, , ,

Mailing Address 59501 414TH LANE

City  
NEW ULMState  
MNZip Code  
56073-4220FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689093

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

37.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3082 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STITT, DALE, , ,

Mailing Address 6004 WATERVIEW DR

City  
ARLINGTONState  
TXZip Code  
76016-2044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688936

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STITT, DALE, , ,

Mailing Address 6004 WATERVIEW DR

City  
ARLINGTONState  
TXZip Code  
76016-2044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688941

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STONER, BEVERLY, , ,

Mailing Address 624 E PRAIRIE ST.

City  
LANARKState  
ILZip Code  
61046-1340FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

389.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689625

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3083 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STURGILL, LARRY, , ,**

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688684

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUTTON, G., SUE, ,**

Mailing Address 13722 LLANO LAKE COURT

City  
HOUSTONState  
TXZip Code  
77059-3306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689416

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, RICHARD, M., MR.,**

Mailing Address 3456 FOX HOLLOW COURT

City  
MARIETTAState  
GAZip Code  
30068-2402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

308.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689339

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

161.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3084 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMAS, ALAN, , ,**Mailing Address 3985 MACEACHEN BLVD  
APT 233City  
SARASOTAState  
FLZip Code  
34233-1100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.10

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687871**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMAS, LANA, , ,**

Mailing Address 1836 COLERIDGE RD

City  
SILER CITYState  
NCZip Code  
27344-8474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.83

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687782**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, LYUBOV, , ,**

Mailing Address 14914 VINTAGE PRESERVE PKWY UNIT 5

City  
HOUSTONState  
TXZip Code  
77070-1578FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

872.55

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688866**

Amount of Each Receipt this Period

0.72

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.80



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3085 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THURMAN, MATT, , MR.,**

Mailing Address 10350 LEHMAN RD

City  
ORLANDOState  
FLZip Code  
32825-6650FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687801**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TUKE, THOMAS, , ,**

Mailing Address 19 HAYFIELD WAY

City  
PITTSFORDState  
NYZip Code  
14534-4621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.06

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689263**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689121**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

186.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3086 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TYPER, DONALD, R., MR.,**

Mailing Address 410 N WEAVER ST

City  
HESSTONState  
KSZip Code  
67062-9041FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLC REALESTATE SERVICESOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688362**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TYPER, DONALD, R., MR.,**

Mailing Address 410 N WEAVER ST

City  
HESSTONState  
KSZip Code  
67062-9041FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLC REALESTATE SERVICESOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688374**

Amount of Each Receipt this Period

12.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. UNDERWOOD, BARBARA, , ,**

Mailing Address 700 CRESTVIEW DRIVE

City  
WOOD RIVERState  
ILZip Code  
62095-3378FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

689.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687968**

Amount of Each Receipt this Period

17.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

32.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3087 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UNDERWOOD, BARBARA, , ,**

Mailing Address 700 CRESTVIEW DRIVE

City  
WOOD RIVERState  
ILZip Code  
62095-3378FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.76

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687987**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687731**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAWTER, STEVE, , ,**

Mailing Address 1701 CATALINA AVE

City  
SEAL BEACHState  
CAZip Code  
90740-5710FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1364.15

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688915**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3088 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VITALI, THEODORE, , ,**

Mailing Address 9802 WINTER NIGHT LANE

City  
SAINT LOUISState  
MOZip Code  
63126-3246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ST. LOUIS UNIVERSITYOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.90

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

Transaction ID : SA11A.27688825

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

Transaction ID : SA11A.27687668

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

Transaction ID : SA11A.27689808

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

52.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3089 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689908**

Amount of Each Receipt this Period

3.69

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27690103**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VON SCHIMMELMANN, KAREN, , ,**

Mailing Address 12521 GRITSTONE DRIVE

City  
DENTONState  
TXZip Code  
76207-5747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.76

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688514**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

39.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3090 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WAHMAN, GERALD, , ,**

Mailing Address PO BOX 789

City  
ALMAState  
ARZip Code  
72921-0789FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688330**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALDROP, MARGIE, WHITMER, MS.,**

Mailing Address 921 SEQUOIA DR.

City  
LANCASTERState  
TXZip Code  
75146-2231FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688999**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALKER, LUCINDA, , ,**

Mailing Address 67 IRVING AVENUE, P.O. BOX 507

City  
HYANNIS PORTState  
MAZip Code  
02647-0507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

610.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689325**

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3091 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEATHERLY, CINDI, , ,**

Mailing Address 4690 MEADOW SPRINGS DRIVE

City  
WATKINSVILLEState  
GAZip Code  
30677-4642FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.16

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688400**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEATHERLY, CINDI, , ,**

Mailing Address 4690 MEADOW SPRINGS DRIVE

City  
WATKINSVILLEState  
GAZip Code  
30677-4642FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.16

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689882**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688134**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3092 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITAKER, LYNN, T., MS.,**

Mailing Address 78601 GORHAM LN

City  
PALM DESERTState  
CAZip Code  
92211-1505FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689127**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITE, STEPHEN, , ,**

Mailing Address 9345 OSAGE CIRCLE

City  
GARDEN RIDGEState  
TXZip Code  
78266-2060FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27687586**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

371.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688065**

Amount of Each Receipt this Period

0.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

285.90



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3093 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLIN

State  
TN

Zip Code  
37067-8238

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.31

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27688066**

Amount of Each Receipt this Period

0.20

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILBUR, RICHARD, MARVIN, ,**

Mailing Address 1650 MONROVIA AVE  
UNIT 213

City  
COSTA MESA

State  
CA

Zip Code  
92627-9032

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.79

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27688795**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILBUR, RICHARD, MARVIN, ,**

Mailing Address 1650 MONROVIA AVE  
UNIT 213

City  
COSTA MESA

State  
CA

Zip Code  
92627-9032

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

394.79

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025

**Transaction ID : SA11A.27688930**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

68.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3094 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, JIMMY, O., MR.,**

Mailing Address 1075 MOTORCOACH DR

City  
POLK CITYState  
FLZip Code  
33868-5113FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.45

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687974**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, DIANE, J., ,**

Mailing Address 47 CR 1220

City  
PITTSBURGState  
TXZip Code  
75686-6192FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688384**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIMBERLEY, JAMES, , ,**

Mailing Address 411 STABLE VIS

City  
SAN ANTONIOState  
TXZip Code  
78227-4391FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

322.88

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688993**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3095 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINTERS, KENNETH, C., MR.,**

Mailing Address 29840 THUNDERPAW DR

City  
HARVESTState  
ALZip Code  
35749-6523FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687649**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOLF, ARTHUR, , ,**Mailing Address 7767 BRISTOL PARK DR.  
UNIT 4SWCity  
TINLEY PARKState  
ILZip Code  
60477-8717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2605.57

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688716**

Amount of Each Receipt this Period

2588.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOOD, RONALD, , MR.,**Mailing Address 21016 SE STARK ST  
UNIT 19City  
GRESHAMState  
ORZip Code  
97030-2043FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.60

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689629**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2687.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3096 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, CAROLYN, , ,**

Mailing Address 30 LISA AVE

City  
POPLAR BLUFFState  
MOZip Code  
63901-9094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688278**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, CAROLYN, , ,**

Mailing Address 30 LISA AVE

City  
POPLAR BLUFFState  
MOZip Code  
63901-9094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27688305**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WYANDT, YON, , ,**

Mailing Address 3739 SPRING COULEE RD

City  
BELLINGHAMState  
WAZip Code  
98226-8887FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11A.27689347**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3097 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687787**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687813**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YATES SMITH, SHARI, , MS.,**

Mailing Address P.O. BOX 2377

City  
RUIDOSOState  
NMZip Code  
88355-2377FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MYCO IND. INC.Occupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

14647.12

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687826**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3098 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YATES, SYLVIA, , ,**

Mailing Address 4107 N ALABAMA ST

City  
LOXLEYState  
ALZip Code  
36551-4533FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.60

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687823**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNGE, BRIAN, , MR.,**

Mailing Address 110 E CENTER ST

City  
MADISONState  
SDZip Code  
57042-2908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27687876**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YOUNGE, BRIAN, , MR.,**

Mailing Address 110 E CENTER ST

City  
MADISONState  
SDZip Code  
57042-2908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

449.00

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689740**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3099 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNG, PATRICIA, , ,**

Mailing Address 9940 PREMIERE VIEW CIR

City  
HAGERSTOWNState  
MDZip Code  
21740-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.42

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688810**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZACHACZ, KATRINA, , ,**

Mailing Address 18111 WAVERLY DR.

City  
SNOHOMISHState  
WAZip Code  
98296-8068FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.36

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27689791**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZAVARZINA, ANYA, , ,**

Mailing Address 802 N DELAWARE ST, 211

City  
SAN MATEOState  
CAZip Code  
94401-1514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GALLIUM ARTISTIC SERVICES SIMSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.60

Date of Receipt

MM / DD / YYYY  
02 / 14 / 2025**Transaction ID : SA11A.27688270**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3100 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZELLMER, GENE, , ,**

Mailing Address 25845 S. CARMEL HILLS DR.

City  
CARMELState  
CAZip Code  
93923-8310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27688349

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZIOMEK, HEIDI, , ,**

Mailing Address 227 TRAFALGAR LANE

City  
SAN CLEMENTEState  
CAZip Code  
92672-5482FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689729

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZWAAN, ROBERT, , ,**

Mailing Address 3516 RHOADS AVENUE

City  
NEWTOWN SQUAREState  
PAZip Code  
19073-3718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PETCARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

261.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA11A.27689490

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.25



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3101 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11C.27690150**

Amount of Each Receipt this Period

92347.51

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABBOTT, DONA, M., MS.,**

Mailing Address 776 BLACK BRANCH RD

City  
RABUN GAPState  
GAZip Code  
30568-2502FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692740**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABUID, JULIA, , ,**

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691569**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3102 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABUID, JULIA, , ,**

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691973**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAIR, STEFAN, , DR.,**

Mailing Address 8591 SKYLINE DR.

City  
LOS ANGELESState  
CAZip Code  
90046-1042FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691646**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AGUILERA, ROBERT, A., MR.,**

Mailing Address 8185 BENEVENTO DR

City  
EL DORADO HILLSState  
CAZip Code  
95762-6217FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

359.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691636**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3103 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AL SHAHWANI, MOHAMMED, , ,**

Mailing Address 1801 BLUE MARBLE TER SE

City  
LEESBURGState  
VAZip Code  
20175-4760FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691498**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALLBRITTEN, KEITH, , ,**

Mailing Address 14441 6215 RD

City  
MONTROSEState  
COZip Code  
81403-7987FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DKD PROPERTYOccupation (for Individual)  
PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690709**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

773.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692033**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

183.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3104 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.65

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692036**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.65

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692038**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

773.65

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692046**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3105 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLSTON, KENNETH, , ,**

Mailing Address 9450 RIVER VIEW RD.

City  
BROOMES ISLANDState  
MDZip Code  
20615-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691813**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALONSO, ALAN, , ,**

Mailing Address 5639 WHITE TRILLIUM LOOP

City  
LAND O LAKESState  
FLZip Code  
34639-2767FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LCCCOccupation (for Individual)  
LMHC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690495**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMSTUTZ, SHERYL, , ,**Mailing Address 1307 S WATER ST  
UNIT 90City  
SILVERTONState  
ORZip Code  
97381-2471FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

866.44

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27693142**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

186.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3106 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CYNNIE, , ,**

Mailing Address 55 RODEO AVENUE # 5

City  
SAUSALITOState  
CAZip Code  
94965-1738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.62

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692923**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, DANA, K., MR.,**Mailing Address 947 NEW HAMPSHIRE ST  
STE 203City  
LAWRENCEState  
KSZip Code  
66044-3074FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MACERICHOccupation (for Individual)  
REAL ESTATE INVESTMENT TRUST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.88

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691005**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ARNOLD, FLORENCE, M., MS.,**

Mailing Address 231 N MANNING ST

City  
HILLSDALEState  
MIZip Code  
49242-1216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.82

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691594**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3107 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARNOLD, FLORENCE, M., MS.,**

Mailing Address 231 N MANNING ST

City  
HILLSDALEState  
MIZip Code  
49242-1216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692999

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARVIG, ALLEN, , ,**

Mailing Address 45329 RED PINE LOOP

City  
PERHAMState  
MNZip Code  
56573-8721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARVIG ENTERPRISESOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692328

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AZZATO, JOE, , ,**

Mailing Address 3333 CLARKSBURG DRIVE

City  
AUSTINState  
TXZip Code  
78745-5809FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KEYSIGHT TECHNOLOGIESOccupation (for Individual)  
QA TESTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690314

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1072.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3108 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AZZATO, JOE, , ,**

Mailing Address 3333 CLARKSBURG DRIVE

City  
AUSTINState  
TXZip Code  
78745-5809FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KEYSIGHT TECHNOLOGIESOccupation (for Individual)  
QA TESTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690319

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AZZATO, JOE, , ,**

Mailing Address 3333 CLARKSBURG DRIVE

City  
AUSTINState  
TXZip Code  
78745-5809FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KEYSIGHT TECHNOLOGIESOccupation (for Individual)  
QA TESTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690451

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AZZATO, JOE, , ,**

Mailing Address 3333 CLARKSBURG DRIVE

City  
AUSTINState  
TXZip Code  
78745-5809FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KEYSIGHT TECHNOLOGIESOccupation (for Individual)  
QA TESTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690454

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.91



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3109 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AZZATO, JOE, , ,**

Mailing Address 3333 CLARKSBURG DRIVE

City  
AUSTINState  
TXZip Code  
78745-5809FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KEYSIGHT TECHNOLOGIESOccupation (for Individual)  
QA TESTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690455

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AZZATO, JOE, , ,**

Mailing Address 3333 CLARKSBURG DRIVE

City  
AUSTINState  
TXZip Code  
78745-5809FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KEYSIGHT TECHNOLOGIESOccupation (for Individual)  
QA TESTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690459

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAHL, BRAD, , ,**

Mailing Address 3244 SWEET DRIVE

City  
LAFAYETTEState  
CAZip Code  
94549-5369FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RC FISCHER COOccupation (for Individual)  
INSURANCE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690192

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

176.98

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3110 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BAILEY, WANDA, , ,

Mailing Address 112 SOUTH 10TH AVE

City  
TEAGUEState  
TXZip Code  
75860-1724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690645

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BAILEY, WANDA, , ,

Mailing Address 112 SOUTH 10TH AVE

City  
TEAGUEState  
TXZip Code  
75860-1724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690646

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BAIRD, CLIFFORD, , ,

Mailing Address 1750 NEWTON ROAD

City  
FERRISState  
TXZip Code  
75125-9464FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MODERN SYSTEMS INCOccupation (for Individual)  
PRO MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

548.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692337

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 3111 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAIRD, CLIFFORD, , ,**

Mailing Address 1750 NEWTON ROAD

City  
FERRISState  
TXZip Code  
75125-9464FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MODERN SYSTEMS INCOccupation (for Individual)  
PRO MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692780

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAKER, JOHN, , ,**

Mailing Address 3054 HWY 223

City  
DEWITTState  
KYZip Code  
40930-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690591

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BANNISTER, JANET, , ,**

Mailing Address 4140 TREAT BLVD.

City  
CONCORDState  
CAZip Code  
94518-1852FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ST. FRANCIS MEMORIAL HOSPITALOccupation (for Individual)  
R.N.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692157

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

257.13

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3112 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARBER, DONNA, , ,**

Mailing Address 527 EAST WATSON STREET

City  
BEDFORD

State  
PA

Zip Code  
15522-2104

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.20

Date of Receipt

02 / 15 / 2025

**Transaction ID : SA11A.27691331**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARNITT, RICHARD, , ,**

Mailing Address 325 COLUMBUS AVENUE

City  
HASBROUCK HEIGHTS

State  
NJ

Zip Code  
07604-1623

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US STATE DEPT

Occupation (for Individual)  
INDEPENDENT CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

02 / 15 / 2025

**Transaction ID : SA11A.27692216**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAYLESS, CHERYL, , ,**

Mailing Address P.O. BOX 380

City  
RIDGWAY

State  
CO

Zip Code  
81432-0380

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

347.00

Date of Receipt

02 / 15 / 2025

**Transaction ID : SA11A.27690827**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

239.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3113 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BECK, ARNOLD, A., MR.,**

Mailing Address 300 FREDRICKSBURG CT. NE

City  
NORTH CANTONState  
OHZip Code  
44720-2575FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691032**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BECKWITH, ART, , MR.,**

Mailing Address P.O. BOX 1029, 507 BUS.

City  
PROGRESOState  
TXZip Code  
78579-1029FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690510**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEIGHT, MARY, , ,**

Mailing Address 2442 RADCLIFFE AVE

City  
INDIANAPOLISState  
INZip Code  
46227-8655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690751**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3114 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEIGHT, MARY, , ,**

Mailing Address 2442 RADCLIFFE AVE

City  
INDIANAPOLISState  
INZip Code  
46227-8655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693116**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BELL, BONNIE, , ,**

Mailing Address 778 1ST ST NW

City  
SAINT PAULState  
MNZip Code  
55112-3216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690187**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BENNETT, BOB, , ,**

Mailing Address 14474 NAVAJO WAY

City  
MANTECAState  
CAZip Code  
95336-2546FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692555**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3115 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BENTLEY, DELORES, , ,**

Mailing Address 4418 ROSSER SQ

City  
DALLASState  
TXZip Code  
75244-6648FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HCAOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690560**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERLIN, STEVEN, , ,**

Mailing Address 12407 DOVER RD

City  
REISTERSTOWNState  
MDZip Code  
21136-5607FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691235**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERLIN, STEVEN, , ,**

Mailing Address 12407 DOVER RD

City  
REISTERSTOWNState  
MDZip Code  
21136-5607FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

452.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692584**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3116 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690300**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690425**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

891.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690427**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3117 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690437

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690439

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

891.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690441

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3118 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BIDWELL, J., TRUMAN, MR., JR.**Mailing Address 2 SUTTON PLACE S  
APT 17ACity  
NEW YORKState  
NYZip Code  
10022-3799FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SULLIVAN & WORCESTER LLPOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691927

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BIVENS, NANCY, , ,**

Mailing Address 2824 WISCONSIN AVE

City  
DAVENPORTState  
IAZip Code  
52806-6797FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691865

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLACKSTONE, MICHAEL, , ,**

Mailing Address 2358 RIVERSIDE AVE VILLA RIVA 106

City  
JACKSONVILLEState  
FLZip Code  
32204-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MICHAEL BLACKSTONEOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1001.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690698

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

121.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3119 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACKSTONE, MICHAEL, , ,**

Mailing Address 2358 RIVERSIDE AVEVILLA RIVA 106

City  
JACKSONVILLEState  
FLZip Code  
32204-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MICHAEL BLACKSTONEOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690703**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLACK, TIMOTHY, , ,**

Mailing Address 9811 198TH AVENUE CT. E

City  
BONNEY LAKEState  
WAZip Code  
98391-5951FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DHSOccupation (for Individual)  
LEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691980**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLANKENSHIP, KATHY, , ,**

Mailing Address 125 ORCHARD DR.

City  
ELIDAState  
OHZip Code  
45807-1084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

296.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692852**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3120 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691184**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOWE, THOMAS, , ,**

Mailing Address 1924 TARA CT

City  
GREENVILLEState  
NCZip Code  
27858-1692FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690655**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOWEN, STEPHEN, , ,**

Mailing Address 212 IVY RD

City  
EQUALITYState  
ALZip Code  
36026-2740FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CRADDOCK HEALTH CENTEROccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690200**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3121 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMASState  
ORZip Code  
97015-8629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690373**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, SARA, , ,**Mailing Address 120 AZALEA LOOP  
SUITE ACity  
HORSESHOE BAYState  
TXZip Code  
78657-6205FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692600**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOZEMAN, BARBARA, , ,**

Mailing Address 2414 HIGHWAY 53 E

City  
JASPERState  
GAZip Code  
30143-4346FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691582**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3122 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRACKEN, KAY, , ,**

Mailing Address 405 HAMVASY

City  
TYLERState  
TXZip Code  
75701-5324FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRACKEN INTERESTOccupation (for Individual)  
OIL AND GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2334.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691825**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRENNER, DOUGLAS, , ,**

Mailing Address 6360 BUTTERNUT DR.

City  
WEST OLIVEState  
MIZip Code  
49460-9153FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690549**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROADHEAD, ANN, B., ,**

Mailing Address PO BOX 2348

City  
KILL DEVIL HILLSState  
NCZip Code  
27948-2348FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

298.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692107**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3123 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROCK, KENNETH, , ,**

Mailing Address 408 N 9TH STREET

City  
NEW BADENState  
ILZip Code  
62265-1137FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691198

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRODERICK, FRANCIS, , ,**

Mailing Address 16 DUCK POND LN

City  
RAMSEYState  
NJZip Code  
07446-1643FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691487

Amount of Each Receipt this Period

3.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRONSON, CAROL, , ,**

Mailing Address 760 SURREY HILL WAY

City  
ROCHESTERState  
NYZip Code  
14623-3055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

276.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691356

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

69.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3124 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROSTOWITZ, MICHAEL, , MR.,**Mailing Address 1322 S PRAIRIE AVE  
UNIT 1606City  
CHICAGOState  
ILZip Code  
60605-3083FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692957

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, JAMES, , ,**

Mailing Address 146 AARONVALE

City  
BIRMINGHAMState  
ALZip Code  
35242-7353FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GSAOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691834

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, LINDA, S., ,**Mailing Address 8561 ANDERSON CREEK CIR  
APT 1204City  
DALLASState  
TXZip Code  
75243-1374FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

990.51

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692582

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

321.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3125 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, PATRICK, , ,**

Mailing Address 17077 PAWNEE XING

City  
COLLEGE STATIONState  
TXZip Code  
77845-6351FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONSTELLISOccupation (for Individual)  
SECURITY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692292**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, THOMAS, , ,**

Mailing Address 345 GREEN DOLPHIN DRIVE

City  
PLACIDAState  
FLZip Code  
33946-2238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690676**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRYAN, NATHAN, , ,**

Mailing Address 340 LIVE OAK ROAD

City  
PAICINESState  
CAZip Code  
95043-9718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PINNACLES TELEPHONE CO.Occupation (for Individual)  
TELECOMMUNICATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

211.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692275**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

215.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3126 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITYState  
NJZip Code  
08226-2367FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690924**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURGER, CARLEEN, M., MS.,**

Mailing Address 7316 NICHOLS RD

City  
OKLAHOMA CITYState  
OKZip Code  
73120-1227FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691968**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUTZER, DONNA, , ,**

Mailing Address 943 WELKIN COURT

City  
CONWAYState  
SCZip Code  
29526-9275FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

388.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692685**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

511.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3127 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CADY, WILLIAM, CURTIS, MR.,**

Mailing Address 1426 SOUTH 50TH STREET

City  
KANSAS CITYState  
KSZip Code  
66106-1726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.92

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691568**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAPALBO, JOHN, , MR.,**

Mailing Address 6825 E WASHINGTON BLVD

City  
LOS ANGELESState  
CAZip Code  
90040-1905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690792**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAPLIN, DAVID, J., ,**

Mailing Address 124 WATER TURKEY CT

City  
DAYTONA BEACHState  
FLZip Code  
32119-8710FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692567**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

178.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3128 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692824**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27693147**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARREL, RONALD, , ,**

Mailing Address 10456 E 201ST ST S

City  
BIXBYState  
OKZip Code  
74008-6747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.29

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692548**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

138.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3129 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CASE, CHARLES, , MR.,**

Mailing Address 1540 CARR ST

City  
RALEIGHState  
NCZip Code  
27608-2302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EARTH AND WATER LAWOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690883**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CASE, VICTORIA, , ,**

Mailing Address 541 LITTLE SEWICKLEY CREEK ROAD

City  
SEWICKLEYState  
PAZip Code  
15143-8310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692491**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CASPERSON, CAROLINA, , MS.,**

Mailing Address 100 SAINT PAUL ST, STE 700

City  
DENVERState  
COZip Code  
80206-5143FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MUSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692414**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

153.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3130 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAYCE, RICHARD, , ,**

Mailing Address 5801 NAPLES DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-2306FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691076**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CERNUDA, HERMINIO, L., MR.,**

Mailing Address 5320 SW 5TH TER

City  
CORAL GABLESState  
FLZip Code  
33134-1126FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692841**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHASE, KENNETH, R., MR.,**

Mailing Address 12227 RIOS RD

City  
SAN DIEGOState  
CAZip Code  
92128-2703FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691911**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3131 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHAVEZ, GEORGE, , ,**

Mailing Address POST OFFICE BOX 393

City  
YERMOState  
CAZip Code  
92398-0393FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KBROccupation (for Individual)  
VEHICLE SUPPORT TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690981**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHOW, ADA, , ,**

Mailing Address 2100 TOWERS , PH1

City  
COCOA BEACHState  
FLZip Code  
32931-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691438**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHRISTIAN, CLAUDIA, , ,**

Mailing Address 406 SOUTH 43RD ST.

City  
PHILADELPHIAState  
PAZip Code  
19104-3935FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692427**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

136.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3132 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHRISTIAN, CLAUDIA, , ,**

Mailing Address 406 SOUTH 43RD ST.

City  
PHILADELPHIAState  
PAZip Code  
19104-3935FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692439**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHRISTIAN, SUSAN, A., MRS.,**

Mailing Address 2828 ASH MILL RD

City  
DOYLESTOWNState  
PAZip Code  
18902-1931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693122**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHURCH, STEVE, , ,**

Mailing Address 711 MAPLE ST

City  
ALVAState  
OKZip Code  
73717-2743FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692170**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3133 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COKER, RUTH, J., MS.,**

Mailing Address P.O. BOX 814

City  
ROOSEVELTState  
AZZip Code  
85545-0814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691256**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COMMONS, DONNA, , ,**

Mailing Address 2728 LAKE SHORE BLVD

City  
JACKSONVILLEState  
FLZip Code  
32210-5337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691423**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COOK, CHARLES, , ,**

Mailing Address 31 OCEAN REEF DR.

C101-194

City  
KEY LARGOState  
FLZip Code  
33037-5282FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693070**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

256.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3134 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COOMBES, JIM, , MR.,**Mailing Address 7031 BEACH DR. SW  
APT DCity  
SEATTLEState  
WAZip Code  
98136-2095FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONSTRUCTION PLANNING AND M.Occupation (for Individual)  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692149**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CORTNER, DIANE, , ,**

Mailing Address 4849 FLORIDA AVE NORTH

City  
MINNEAPOLISState  
MNZip Code  
55428-4609FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691175**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COUCH, MARILYN, , ,**Mailing Address 2232 42ND AVENUE SE  
UNIT 577City  
SALEMState  
ORZip Code  
97317-6179FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691267**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3135 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COUNTRYMAN, BYRON, E., MR.,**

Mailing Address 5933 W. CENTURY BLVD.,

City  
LOS ANGELESState  
CAZip Code  
90045-5472FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COUNTRYMAN AND DANIELOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.18

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692057**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COWHEY, DENNIS, , ,**

Mailing Address 11861 MISTY ARBOR RUN

City  
FORT MYERSState  
FLZip Code  
33913-9417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692646**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COWHEY, DENNIS, , ,**

Mailing Address 11861 MISTY ARBOR RUN

City  
FORT MYERSState  
FLZip Code  
33913-9417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692654**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3136 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CREEL, DEBBIE, , ,**

Mailing Address 11 BURNING TREE COURT

City  
LAS VEGASState  
NVZip Code  
89113-1329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691675**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CROZIER, MARILYN, , ,**

Mailing Address 11928 FARWELL ROAD

City  
PHILADELPHIAState  
PAZip Code  
19154-3419FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691638**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURRAN, WILLIAM, , ,**

Mailing Address 4601 HEY A1A

City  
VERO BEACHState  
FLZip Code  
32963-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692118**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3137 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. D'ARMOND, DAVID, B., ,**

Mailing Address 2800 VIA ROSSO ST UNIT 502

City  
SPRINGFIELDState  
ILZip Code  
62703-6803FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691562**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAMON, CAROLYN, J., MS.,**

Mailing Address POB 791719

City  
PAIAState  
HIZip Code  
96779-1719FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690266**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAVIS, CLAUDE, A., ,**

Mailing Address 6752 TAYLOR WOODS LN

City  
PLEASANT GARDENState  
NCZip Code  
27313-8139FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
RETAIL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

206.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690307**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3138 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DE BEUKELAER, PETER, , ,**

Mailing Address 182 SWAN SEA LANE

City  
MADISONState  
MSZip Code  
39110-9429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PETER DE BEUKELAEROccupation (for Individual)  
PRESIDENT DBC CORP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692009**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690328**

Amount of Each Receipt this Period

18.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691672**

Amount of Each Receipt this Period

37.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3139 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOANE, JIM, P., MR.,**

Mailing Address 3460 MINGLEWOOD DR.

City  
BEAUMONTState  
TXZip Code  
77703-2736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692204**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DONOVAN, ANNE, , ,**

Mailing Address 4 WEDGE LANE

City  
SELDENState  
NYZip Code  
11784-3309FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.14

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691534**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOWDY, JOHN, , MR., JR.**

Mailing Address 3706 N SHADYCREEK DR.

City  
ARLINGTONState  
TXZip Code  
76013-1017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690596**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

215.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3140 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOWDY, JOHN, , MR., JR.**

Mailing Address 3706 N SHADYCREEK DR.

City  
ARLINGTONState  
TXZip Code  
76013-1017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692129**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRAZAN, ARTHUR, D., ,**

Mailing Address 330 EAGLE DRIVE

City  
JUPITERState  
FLZip Code  
33477-4066FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691255**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DRONE, DARLENE, , ,**

Mailing Address 11700 SOUTHWIND RD

City  
RIDGWAYState  
ILZip Code  
62979-2424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

712.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690399**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3141 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUGAS, MATTHEW, P., MR.,**

Mailing Address 11 WILDFLOWER PLACE

City  
NORTH OAKSState  
MNZip Code  
55127-6223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ARCOccupation (for Individual)  
ARC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691779**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUGUIG, LINDA, , ,**

Mailing Address 227 ROLLING KNOLL DRIVE

City  
BEL AIRState  
MDZip Code  
21014-5632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.64

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692289**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNLEVY, PATRICIA, , ,**

Mailing Address 5121 BROWNSTONE DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-6028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.90

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692132**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

243.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3142 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNLEVY, PATRICIA, , ,**

Mailing Address 5121 BROWNSTONE DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-6028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692156**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DURANT, TOM, , ,**

Mailing Address 1557 MEETING STREET

City  
SOUTHLAKEState  
TXZip Code  
76092-1402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CLASSIC CHEVROLETOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692448**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DYE, SANDRA, , ,**

Mailing Address 7759 WEST 4TH STREET

City  
RENOState  
NVZip Code  
89523-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691956**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

610.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3143 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EACK, CRYSTAL, , ,**

Mailing Address 691 IONE AVENUE NORTHEAST

City  
SPRING LAKE PARKState  
MNZip Code  
55432-1146FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693053**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691135**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EATON, DAN, , ,**

Mailing Address 216 OAK HEIGHTS DRIVE

City  
OAKDALEState  
PAZip Code  
15071-1138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSTRUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691147**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

169.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3144 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ECKLES, CHERYL, , ,**

Mailing Address 1310 VANTUYL DR.

City  
LAWRENCEState  
KSZip Code  
66049-3765FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692135**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EDWARDS, DALE, , MR.,**

Mailing Address 124 SE SANDSTONE DR.

City  
BLUE SPRINGSState  
MOZip Code  
64014-3812FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692819**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EDWARDS, ERVIN, , MR.,**

Mailing Address 105 RAVENS LNDG

City  
FAYETTEVILLEState  
GAZip Code  
30215-4699FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

439.33

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691524**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

243.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3145 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELDAR, LUE ANN, , ,**

Mailing Address 1632 HARMON COVE TOWER

City  
SECAUCUSState  
NJZip Code  
07094-1766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AMAZONOccupation (for Individual)  
E-COMMERCE OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690204**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELDAR, LUE ANN, , ,**

Mailing Address 1632 HARMON COVE TOWER

City  
SECAUCUSState  
NJZip Code  
07094-1766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AMAZONOccupation (for Individual)  
E-COMMERCE OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693121**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692421**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3146 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EVANS, LINDA, , ,**

Mailing Address 130 CRESCENT AVE. #306

City  
SUNNYVALEState  
CAZip Code  
94087-2765FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691114**

Amount of Each Receipt this Period

60.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EVANS, LORETTA, , ,**

Mailing Address 450 N. KROCKS RD/ UNIT 331

City  
ALLENTOWNState  
PAZip Code  
18106-8934FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692705**

Amount of Each Receipt this Period

17.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FAIN, RANDALL, L., MR.,**

Mailing Address 3705 SUNSET MEADOWS DR.

City  
PEARLANDState  
TXZip Code  
77581-6782FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1178.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691056**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3147 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAIRBROTHER, BETH, , ,**

Mailing Address P.O. BOX 741

City  
COMANCHEState  
TXZip Code  
76442-0741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692808**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FALLON, JOHN, , ,**Mailing Address 2702 DOUGLAS AVE  
#125City  
DALLASState  
TXZip Code  
75219-3456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692269**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FANELLI, GLEN, HUNT, ,**

Mailing Address 11560 WOODBANK PLWY

City  
TUSCALOOSAState  
ALZip Code  
35403-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691372**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3148 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAUBION, DEBI, , ,**

Mailing Address 1733 NORMAL HILL

City  
EDMONDState  
OKZip Code  
73034-4992FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KNOWLEDGE CONSULTANTSOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692159**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691485**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FIELDS, CONNIE, , ,**

Mailing Address 606 E MEDUSA ST

City  
SYRACUSEState  
INZip Code  
46567-1606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

528.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691200**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.93



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3149 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FIELDS, CONNIE, , ,**

Mailing Address 606 E MEDUSA ST

City  
SYRACUSEState  
INZip Code  
46567-1606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691389**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FIELDS, PATRICIA, , MS.,**Mailing Address 3455 CAMINITO SIERRA  
UNIT 302City  
CARLSBADState  
CAZip Code  
92009-8668FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690337**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FILIPSKI, DARLA, , ,**

Mailing Address 3903 PRESTON CT

City  
NORMANState  
OKZip Code  
73072-5019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1008.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690958**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

244.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3150 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FILIPSKI, DARLA, , ,**

Mailing Address 3903 PRESTON CT

City  
NORMANState  
OKZip Code  
73072-5019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692106**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FINCH, OWEN, , ,**

Mailing Address 5210 CHAMPLAIN BEND ST

City  
HOUSTONState  
TXZip Code  
77056-4206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690331**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISCHER, DALE, A., MR.,**

Mailing Address 22562 CLAUDE CIR.

City  
LAKE FORESTState  
CAZip Code  
92630-4609FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ACE ENTERENEASOccupation (for Individual)  
ADMIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693126**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

181.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3151 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISCHER, STEPHEN, M., MR.,**

Mailing Address 17520 LAKESEDGE TRAIL

City  
CHAGRIN FALLSState  
OHZip Code  
44023-2115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.05

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690174**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFFState  
AZZip Code  
86005-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.05

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692249**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLOYD, JOHN, D., ,**

Mailing Address 3418 NORTHBORO CT.

City  
MURFREESBOROState  
TNZip Code  
37129-1208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

293.08

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690233**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

165.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3152 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORCIER, RONALD, , ,**

Mailing Address 5 BISHOP ROAD APT303

City  
WEST HARTFORDState  
CTZip Code  
06119-1538FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691278**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FOUT, SANDRA, , MS.,**

Mailing Address 13019 N SUNRISE CANYON LN

City  
MARANAState  
AZZip Code  
85658-4035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BD OF EDOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690297**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANZMEIER, ALVIN, H., DR.,**Mailing Address 1300 S BORDER  
APT 731City  
WESLACOState  
TXZip Code  
78596-7441FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.53

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690810**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

256.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3153 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRANZMEIER, ALVIN, H., DR.,**Mailing Address 1300 S BORDER  
APT 731City  
WESLACOState  
TXZip Code  
78596-7441FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.53

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

**Transaction ID : SA11A.27691467**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRIEDKIN, MONTE, , ,**

Mailing Address 7673 WOOD DUCK DRIVE

City

BOCA RATON

State

FL

Zip Code

33434-5143

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

**Transaction ID : SA11A.27691818**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRITZ, DOUGLAS, , ,**

Mailing Address 3520 NORTH CALLE VISTOSA

City

TUCSON

State

AZ

Zip Code

85750-2705

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

**Transaction ID : SA11A.27691364**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

207.18

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3154 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRITZ, JOHN, , MR.,**

Mailing Address P.O. BOX 3115

City  
**BIG BEAR LAKE**

State  
**CA**

Zip Code  
**92315-3115**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**986.67**

Date of Receipt

**02 / 15 / 2025**

**Transaction ID : SA11A.27691848**

Amount of Each Receipt this Period

**1.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRONCZAK, BRENDA, , ,**

Mailing Address 121 GASCOIGNE BLUFF RD.

City  
**BLUFFTON**

State  
**SC**

Zip Code  
**29910-6800**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**511.67**

Date of Receipt

**02 / 15 / 2025**

**Transaction ID : SA11A.27690161**

Amount of Each Receipt this Period

**10.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRONCZAK, BRENDA, , ,**

Mailing Address 121 GASCOIGNE BLUFF RD.

City  
**BLUFFTON**

State  
**SC**

Zip Code  
**29910-6800**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**511.67**

Date of Receipt

**02 / 15 / 2025**

**Transaction ID : SA11A.27690164**

Amount of Each Receipt this Period

**36.44**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**47.44**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3155 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRONCZAK, BRENDA, , ,**

Mailing Address 121 GASCOIGNE BLUFF RD.

City  
BLUFFTONState  
SCZip Code  
29910-6800FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690166

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRONCZAK, BRENDA, , ,**

Mailing Address 121 GASCOIGNE BLUFF RD.

City  
BLUFFTONState  
SCZip Code  
29910-6800FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690168

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRONCZAK, BRENDA, , ,**

Mailing Address 121 GASCOIGNE BLUFF RD.

City  
BLUFFTONState  
SCZip Code  
29910-6800FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

511.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690170

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3156 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRONCZAK, BRENDA, , ,**

Mailing Address 121 GASCOIGNE BLUFF RD.

City  
BLUFFTONState  
SCZip Code  
29910-6800FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690175

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRONCZAK, BRENDA, , ,**

Mailing Address 121 GASCOIGNE BLUFF RD.

City  
BLUFFTONState  
SCZip Code  
29910-6800FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690178

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRONCZAK, BRENDA, , ,**

Mailing Address 121 GASCOIGNE BLUFF RD.

City  
BLUFFTONState  
SCZip Code  
29910-6800FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

511.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690179

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.19



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3157 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FULDNER, CHRIS, T., MR.,**

Mailing Address 5035 STONEGATE CT

City  
SPRINGFIELDState  
MOZip Code  
65809-4013FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

**Transaction ID : SA11A.27691159**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAGNON, ARLINE, M., MS.,**

Mailing Address 1034 MAPLECHASE DR. SE

City  
LELANDState  
NCZip Code  
28451-9515FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

**Transaction ID : SA11A.27691014**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

**Transaction ID : SA11A.27690536**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

181.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3158 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAMBRELL, MARY, , MS.,**

Mailing Address 542 JAMESON RD

City  
EASLEYState  
SCZip Code  
29640-8715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.26

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691158**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690588**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GAVINO, HENRY, , , III**

Mailing Address 386 DRIFTWOOD TERRACE

City  
BOCA RATONState  
FLZip Code  
33431-8259FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

432.88

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690994**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3159 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GELBMAN, JOEL, , ,**

Mailing Address 6476 ARRIBA AVE

City  
NAPLESState  
FLZip Code  
34113-9061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692695**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GENALDI, ALLEN, JAY, MR.,**

Mailing Address 32007 POWDERPUFF MIMOSA DR.

City  
SAN ANTONIOState  
FLZip Code  
33576-7352FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692024**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEORGUSIS, JOSEPH, , ,**

Mailing Address 2 FORREST COURT

City  
METAIRIEState  
LAZip Code  
70001-6155FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690385**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

154.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3160 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GHUMM, BELINDA, S., ,**

Mailing Address 22734 SUMAC ROAD

City  
ORONOGOState  
MOZip Code  
64855-9173FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690661**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILMORE, KEN, , ,**

Mailing Address 807 HAMPSHIRE RD

City  
DREXEL HILLState  
PAZip Code  
19026-1615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.05

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692800**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIRVIN, JOANN, , MRS.,**

Mailing Address 7110 CREEKSIDE DR.

City  
LANSINGState  
MIZip Code  
48917-9618FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

775.55

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690517**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3161 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIUGLIANO, ROBERT, , ,**

Mailing Address 2202 BUCKHOLT STREET

City  
PEARLANDState  
TXZip Code  
77581-6218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.65

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691758**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIUGLIANO, ROBERT, , ,**

Mailing Address 2202 BUCKHOLT STREET

City  
PEARLANDState  
TXZip Code  
77581-6218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.65

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691762**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIUGLIANO, ROBERT, , ,**

Mailing Address 2202 BUCKHOLT STREET

City  
PEARLANDState  
TXZip Code  
77581-6218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.65

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691768**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

58.80

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3162 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIUGLIANO, ROBERT, , ,**

Mailing Address 2202 BUCKHOLT STREET

City  
PEARLAND

State  
TX

Zip Code  
77581-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.65

Date of Receipt

02 / 15 / 2025

**Transaction ID : SA11A.27691786**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIUGLIANO, ROBERT, , ,**

Mailing Address 2202 BUCKHOLT STREET

City  
PEARLAND

State  
TX

Zip Code  
77581-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.65

Date of Receipt

02 / 15 / 2025

**Transaction ID : SA11A.27691808**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLAS

State  
TX

Zip Code  
75240-4488

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORK

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

02 / 15 / 2025

**Transaction ID : SA11A.27691828**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

130.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3163 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLENN, SAMUEL, , , JR.**Mailing Address 5490 ARBOR BRANCH DR.  
APT 234City  
SHALLOTTEState  
NCZip Code  
28470-6111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690850**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOBER, RACHELL, , ,**

Mailing Address 1631 OCEAN BLVD

City  
ATLANTIC BEACHState  
NYZip Code  
11509-1597FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690361**

Amount of Each Receipt this Period

98.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOLDMAN, BARBARA, , ,**

Mailing Address 798 N 73RD WEST AVE

City  
TULSAState  
OKZip Code  
74127-5683FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690428**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

143.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3164 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GONZALEZ-BOHORQUEZ, FELIX, E., ,**

Mailing Address 827 BOWIE ROAD

City  
ROCKVILLEState  
MDZip Code  
20852-1042FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.77

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692430**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAHAM, JOSEPH, , ,**

Mailing Address 106 LAKEVIEW LANE

City  
HEADLANDState  
ALZip Code  
36345-2202FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.81

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691342**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAYBASH, PETER, J., MR., JR.**

Mailing Address 4 CAMBRIDGE DR.

City  
HERSHEYState  
PAZip Code  
17033-2100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690293**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.97



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3165 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAYBASH, PETER, J., MR., JR.**

Mailing Address 4 CAMBRIDGE DR.

City  
HERSHEYState  
PAZip Code  
17033-2100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692778

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692119

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692163

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

94.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3166 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREENE, BETTY, L., ,**

Mailing Address 711 POSSUM HOLLOW RD

City  
BLOWING ROCKState  
NCZip Code  
28605-9219FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692700**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREENSTEIN, LORRAINE, , ,**

Mailing Address 162 ADAMS STREET

City  
DENVERState  
COZip Code  
80206-5239FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PROPERTY MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.48

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691903**

Amount of Each Receipt this Period

18.74

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREINER, MICHAEL, J., ,**

Mailing Address PO BOX 621

City  
MARSTONS MILLSState  
MAZip Code  
02648-0621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

945.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692293**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3167 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREMBI, JAMES, , MR.,**

Mailing Address 82 PUTTER DRIVE

City  
PALM COASTState  
FLZip Code  
32164-4700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.97

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690578**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRESLEY, ROSS, , ,**

Mailing Address 8278 CLIPPER COURT

City  
CATAWBAState  
NCZip Code  
28609-8287FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.76

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690689**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROEFSEMA, GLENN, , ,**

Mailing Address 10122 87TH AVE SW

City  
LAKEWOODState  
WAZip Code  
98498-4459FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.76

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690644**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3168 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROEFSEMA, GLENN, , ,**

Mailing Address 10122 87TH AVE SW

City  
LAKEWOODState  
WAZip Code  
98498-4459FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.76

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690834**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROUND, JIM, , ,**

Mailing Address 9791 E DREYFUS AVE

City  
SCOTTSDALEState  
AZZip Code  
85260-4450FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.83

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691263**

Amount of Each Receipt this Period

38.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUDORF, KENNETH, , ,**

Mailing Address 970 CAPE MARCO DR.

City  
MARCO ISLANDState  
FLZip Code  
34145-6399FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1716.06

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692996**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3169 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUDORF, KENNETH, , ,**

Mailing Address 970 CAPE MARCO DR.

City  
MARCO ISLANDState  
FLZip Code  
34145-6399FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1716.06

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692997**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUNN PHILLIPS, BEATRICE, ELVA, MS.,**

Mailing Address 16399 WATSON RD

City  
GUERNEVILLEState  
CAZip Code  
95446-8937FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.75

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692239**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAHNEMANN, ARTUR, , ,**

Mailing Address 4510 140TH AVE SE

City  
BELLEVUEState  
WAZip Code  
98006-2343FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.30

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27693066**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3170 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HALL, CATHERINE, , ,**

Mailing Address 6825 GRAND AVE

City  
DOWNERS GROVEState  
ILZip Code  
60516-3652FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690303**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HALL, CATHERINE, , ,**

Mailing Address 6825 GRAND AVE

City  
DOWNERS GROVEState  
ILZip Code  
60516-3652FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690477**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HALL, JOHN, , ,**

Mailing Address 5064 GREEN KNOLLS LN.

City  
ANN ARBORState  
MIZip Code  
48103-1415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

547.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691410**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3171 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HALL, JOHN, , ,**

Mailing Address 5064 GREEN KNOLLS LN.

City  
ANN ARBORState  
MIZip Code  
48103-1415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691686**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMM, RUTH, , ,**

Mailing Address 275 MAYO DRIVE

City  
BULLARDState  
TXZip Code  
75757-9595FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691287**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRIS, DIANE, , ,**

Mailing Address 5021 WEST 4075 SOUTH

City  
WEST HAVENState  
UTZip Code  
84401-9386FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690820**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3172 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRIS, DIANE, , ,**

Mailing Address 5021 WEST 4075 SOUTH

City  
WEST HAVENState  
UTZip Code  
84401-9386FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690928**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HASH, SHIRLEY, , ,**

Mailing Address 6038 ROYAL GATE PLACE

City  
INDIANAPOLISState  
INZip Code  
46237-9242FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.46

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691722**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAWKINS, ALLAN, , ,**

Mailing Address 10120 BITTERN DRIVE

City  
PENSACOLAState  
FLZip Code  
32507-7208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.30

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692973**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

127.73



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3173 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEATHMAN, CHRISTINE, , ,**

Mailing Address 1119 SOUTH SAGE CREEK COURT

City  
HEBER CITYState  
UTZip Code  
84032-4169FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLYMED PLUSOccupation (for Individual)  
FORMULATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1144.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691120**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENDERSON, GREG, , ,**

Mailing Address 6 POWER WAY

City  
STAFFORDState  
VAZip Code  
22554-6516FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691857**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERMES, WARREN, , MR.,**

Mailing Address 3925 WASHINGTON ST

City  
HOLLYWOODState  
FLZip Code  
33021-7348FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LPLOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

354.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690728**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

243.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3174 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HESS, SUZANNE, , ,**

Mailing Address 5590 N BARRASCA AVE

City  
TUCSONState  
AZZip Code  
85750-6494FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690408**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HIGGINS, MARSHA, , ,**

Mailing Address P.O. BOX 48

City  
VERBANKState  
NYZip Code  
12585-0048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.67

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691211**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILES, SHELLEY, , ,**

Mailing Address 2737 COUNTY STREET 2950

City  
BLANCHARDState  
OKZip Code  
73010-4231FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.86

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691066**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3175 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

**Transaction ID : SA11A.27691143**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

**Transaction ID : SA11A.27691144**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

**Transaction ID : SA11A.27691149**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

132.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3176 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691173**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691740**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691741**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3177 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

**Transaction ID : SA11A.27691745**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

**Transaction ID : SA11A.27691747**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

**Transaction ID : SA11A.27691750**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3178 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691751**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691754**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692110**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

165.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3179 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27693001**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27693002**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27693003**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3180 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693004**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693005**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693006**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.70



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3181 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOFFMAN, GARY, , ,**

Mailing Address 10561 HAWKS LANDING TERRACE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3106FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692784**

Amount of Each Receipt this Period

24.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOILES, PAMELA, , ,**Mailing Address 37 DAVENPORT AVE  
APT 1City  
GREENWICHState  
CTZip Code  
06830-7176FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690415**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLLINGTON, MARGARET, , ,**

Mailing Address 9960 ATRIUM WAY APT 514

City  
JACKSONVILLEState  
FLZip Code  
32225-6447FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691108**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3182 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLLOBAUGH, JOHN, , ,**

Mailing Address 810 EAST ST

City  
ALTOONAState  
PAZip Code  
16602-5451FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.63

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692463**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLSTEIN, CAROLYN, , ,**

Mailing Address 11691 S RIDGEVIEW RD. APT. 303

City  
OLATHEState  
KSZip Code  
66061-6679FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.29

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690584**

Amount of Each Receipt this Period

3.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLMES, VICKI, , ,**

Mailing Address 7224 COMANCHE TRL.

City  
AUSTINState  
TXZip Code  
78732-1011FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.48

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692787**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3183 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLMES, VICKI, , ,**

Mailing Address 7224 COMANCHE TRL.

City  
AUSTINState  
TXZip Code  
78732-1011FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692791

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLTEN, JAMES, J., MR.,**

Mailing Address 4003 CHESTNUT OAK DR

City  
SMITHTONState  
ILZip Code  
62285-3741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1366.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692581

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLTEN, JAMES, J., MR.,**

Mailing Address 4003 CHESTNUT OAK DR

City  
SMITHTONState  
ILZip Code  
62285-3741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1366.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692583

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

91.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3184 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLTEN, JAMES, J., MR.,**

Mailing Address 4003 CHESTNUT OAK DR

City  
SMITHTONState  
ILZip Code  
62285-3741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1366.44

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692590**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLTEN, JAMES, J., MR.,**

Mailing Address 4003 CHESTNUT OAK DR

City  
SMITHTONState  
ILZip Code  
62285-3741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1366.44

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692596**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLTEN, JAMES, J., MR.,**

Mailing Address 4003 CHESTNUT OAK DR

City  
SMITHTONState  
ILZip Code  
62285-3741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1366.44

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692602**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3185 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLTEN, JAMES, J., MR.,**

Mailing Address 4003 CHESTNUT OAK DR

City  
SMITHTONState  
ILZip Code  
62285-3741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1366.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692610**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690157**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

334.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690162**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3186 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.95

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690603

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27693038

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27693039

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3187 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUBBARD, BARBARA, A., MS.,**

Mailing Address P.O. BOX 1736

City  
LAS CRUCESState  
NMZip Code  
88004-1736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.41

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690567**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBER, MARY, R., ,**

Mailing Address 37641 30TH STREET

City  
ELMOREState  
MNZip Code  
56027-2035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.68

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692878**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBER, SCOTT, E., MR.,**

Mailing Address 82 FOXFIRE LN

City  
LEWISBERRYState  
PAZip Code  
17339-9337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TSELVES RESEARCHOccupation (for Individual)  
ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

388.93

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692327**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3188 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUGHES, MARY ANNE, , ,**

Mailing Address 35803 CORNELL DR

City  
YUCAIPAState  
CAZip Code  
92399-4047FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.16

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691302**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUMPHRIES, CATHY, , ,**

Mailing Address 972 E SEA BISCUIT WAY

City  
WASHINGTONState  
UTZip Code  
84780-3024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.68

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692789**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUNT, MARION, , ,**

Mailing Address 552 MONTI DR.

City  
LEWISVILLEState  
TXZip Code  
75057-2250FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DISDOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.06

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690987**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.88



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3189 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUNT, MARION, , ,**

Mailing Address 552 MONTI DR.

City  
LEWISVILLEState  
TXZip Code  
75057-2250FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DISDOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691812**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUSTAD, JANET, , ,**

Mailing Address 51806 PELICAN POINT DRIVE

City  
DETROIT LAKESState  
MNZip Code  
56501-9405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

898.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690727**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUSTAD, JANET, , ,**

Mailing Address 51806 PELICAN POINT DRIVE

City  
DETROIT LAKESState  
MNZip Code  
56501-9405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

898.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692322**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3190 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUTSON, D, RUTH, ,**

Mailing Address 509 CRYSTAL SPRINGS CIRCLE

City  
JOHNSON CITYState  
TNZip Code  
37615-2356FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.66

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690285**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUVAL, TERRY, , ,**

Mailing Address 136 SHELBY OAKS LANE

City  
LAFAYETTEState  
LAZip Code  
70507-5800FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690382**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690651**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3191 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690656**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACKSON, JAMES, A., ,**Mailing Address 262 LITTLE HENDRICKS MT CIRCLE  
#20820City  
JASPERState  
GAZip Code  
30143-7548FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690755**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACKSON, RUBY, , ,**Mailing Address 4413 YALE ST  
UNIT CCity  
METAIRIEState  
LAZip Code  
70006-4243FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692094**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3192 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAMES, MARK, , ,**

Mailing Address 5704 SANIBEL BAY

City  
NORTH LAS VEGASState  
NVZip Code  
89031-7223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690877**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691507**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691555**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

39.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3193 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAUDES, MARY, K., MRS.,**

Mailing Address 12657 BRADFORD WOODS DR.

City  
SAINT LOUISState  
MOZip Code  
63127-1360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.95

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691554**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAUDES, MARY, K., MRS.,**

Mailing Address 12657 BRADFORD WOODS DR.

City  
SAINT LOUISState  
MOZip Code  
63127-1360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.95

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692274**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.40

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691716**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

33.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3194 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, BERNICE, , ,**Mailing Address 55 MELROY AVE  
APT 215City  
BUFFALOState  
NYZip Code  
14218-1660FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690281

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, BERNICE, , ,**Mailing Address 55 MELROY AVE  
APT 215City  
BUFFALOState  
NYZip Code  
14218-1660FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690722

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, DELORES, A., MS.,**

Mailing Address 18 MUIRFIELD VILLAGE CT.

City  
SUMMERVILLEState  
SCZip Code  
29483-5093FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

488.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690631

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

87.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3195 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, JAMES, D., MR.,**

Mailing Address P.O. BOX 5897

City  
KINGWOODState  
TXZip Code  
77325-5897FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE AGENT & AGENCY OWN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690654**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, JAMES, D., MR.,**

Mailing Address P.O. BOX 5897

City  
KINGWOODState  
TXZip Code  
77325-5897FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE AGENT & AGENCY OWI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692478**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, KAY, , ,**

Mailing Address 800 NAVAJO AVE

City  
FORT MORGANState  
COZip Code  
80701-4081FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

345.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690589**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3196 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGSState  
IDZip Code  
83276-1671FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692310**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSTON, SANDRA, , ,**

Mailing Address 32 NEW VILLAGE LN

City  
SMYRNAState  
DEZip Code  
19977-4715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692992**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON MORTON, VALERIE, , ,**

Mailing Address 3391 EAST ORANGE BLOSSOM WAY

City  
ONTARIOState  
CAZip Code  
91761-3926FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2782.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691802**

Amount of Each Receipt this Period

83.28

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.54



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3197 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, ALFRED, D., MR., JR.**

Mailing Address 616 LYNN AVE

City  
ANTIOCHState  
CAZip Code  
94509-5030FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692981**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, JANET, , ,**

Mailing Address 2401 STANFORD ROAD

City  
PANAMA CITYState  
FLZip Code  
32405-3589FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AYA HEALTHCAREOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691340**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690468**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

177.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3198 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, PAT, A., ,**

Mailing Address 5471 CEDAR BRANCH CIR.

City  
INDIANAPOLISState  
INZip Code  
46268-3925FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.99

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690592**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, PAT, A., ,**

Mailing Address 5471 CEDAR BRANCH CIR.

City  
INDIANAPOLISState  
INZip Code  
46268-3925FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.99

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691954**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, PAT, A., ,**

Mailing Address 5471 CEDAR BRANCH CIR.

City  
INDIANAPOLISState  
INZip Code  
46268-3925FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.99

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692052**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3199 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWS

State  
TX

Zip Code  
79714-2010

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025

**Transaction ID : SA11A.27690718**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWS

State  
TX

Zip Code  
79714-2010

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025

**Transaction ID : SA11A.27692281**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWS

State  
TX

Zip Code  
79714-2010

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025

**Transaction ID : SA11A.27692765**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3200 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOYCE, RICHARD, , ,**

Mailing Address 1350 E NORTH ST  
LOT 84

City  
CROWN POINT

State  
IN

Zip Code  
46307-6400

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.31

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025

**Transaction ID : SA11A.27692351**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAEMERLE, HAROLD, , MR.,**

Mailing Address 2165 SAN DIEGO AVE  
205

City  
SAN DIEGO

State  
CA

Zip Code  
92110-2908

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HAROLD KAEMERLE

Occupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025

**Transaction ID : SA11A.27691233**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAUR, JUDITH, , ,**

Mailing Address 26 VILLAGE WALK CT

City  
PONTE VEDRA BEACH

State  
FL

Zip Code  
32082-3542

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.16

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025

**Transaction ID : SA11A.27691116**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

140.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3201 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAVAL, KATHLEEN, , ,**

Mailing Address 1596 WANTAGH AVE.

City  
WANTAGHState  
NYZip Code  
11793-3902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690546

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEARNS, RICHARD, , ,**

Mailing Address 13576 EAGLE POINTE DR

City  
PORT CHARLOTTEState  
FLZip Code  
33953-4674FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692899

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691794

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

164.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3202 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692785**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEEN, JACK, W., MR.,**

Mailing Address 7016 DA VINCI

City  
COLLEYVILLEState  
TXZip Code  
76034-8262FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WNM COMMUNICATIONSOccupation (for Individual)  
CHAIRMAN OF THE BOARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1433.88

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691535**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEILLOR, JUDITH, , ,**

Mailing Address 3205 BANYAN CIRCLE

City  
HARLINGENState  
TXZip Code  
78550-7404FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691647**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3203 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KERINS, MARY, , ,**

Mailing Address 127 74TH STREET

City  
NIAGARA FALLSState  
NYZip Code  
14304-4032FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690515

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEYES, ALAN, L., ,**

Mailing Address P.O. BOX 4606

City  
SEVIERVILLEState  
TNZip Code  
37864-4606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IAMTVOccupation (for Individual)  
INFORMATION MEDIA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692546

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KIELY, SUSAN, , ,**

Mailing Address 5500 E PEAKVIEW

City  
LITTLETONState  
COZip Code  
80121-3539FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691749

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

189.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3204 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KING, JAMES, , ,**

Mailing Address 6607 WOODLAND CIRCLE

City  
FORT SMITHState  
ARZip Code  
72916-8988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.78

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692025**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIRKLEN, MOLLY, , ,**

Mailing Address 720 SPICER LOOP

City  
KERRVILLEState  
TXZip Code  
78028-8895FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
TAX ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.26

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690194**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLEIN, MICHAEL, F., MR.,**

Mailing Address 5220 KLEE MILL RD S

City  
SYKESVILLEState  
MDZip Code  
21784-9257FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CHARLES A. KLEIN AND SONSOccupation (for Individual)  
MECHANICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4330.25

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692803**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

336.70



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3205 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNUTSON, TERRY, , ,**

Mailing Address 1562 EDGEWOOD DRIVE

City  
LODI

State  
CA

Zip Code  
95240-0453

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.40

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025

**Transaction ID : SA11A.27692178**

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOHLER, PATTI, , ,**

Mailing Address 105 CRAWLEY ST

City

HUGHESVILLE

State

PA

Zip Code

17737-1205

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.28

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025

**Transaction ID : SA11A.27691062**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOONTZ, LINDA, , ,**

Mailing Address 155 PARKLAND DR

City

SALISBURY

State

NC

Zip Code

28146-8205

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

357.88

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025

**Transaction ID : SA11A.27691016**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3206 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KRAUSE, JAMES, E., ,**

Mailing Address P.O. BOX 209

City  
CROWLEYState  
TXZip Code  
76036-0209FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.96

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690878**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRAUTSCHUN, HARVEY, , ,**

Mailing Address 10791 CHICKEN CREEK ROAD

City  
SPEARFISHState  
SDZip Code  
57783-4111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.10

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692019**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.91

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691146**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

257.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3207 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KURTI, S., CAROL, ,**

Mailing Address 934 COWEE SCHOOL RD.

City  
FRANKLINState  
NCZip Code  
28734-4524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691643**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LACKAMP, ROBERT, , ,**

Mailing Address 606 N LEONARD RD

City  
SAINT JOSEPHState  
MOZip Code  
64506-4025FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691519**

Amount of Each Receipt this Period

49.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANCE, WAYNE, C., MR.,**

Mailing Address 3352 LOUISVILLE RD

City  
LOUISVILLEState  
TNZip Code  
37777-3734FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691018**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

385.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3208 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANDSAW, RUTH, W., ,**

Mailing Address 14481 DAWN HILL RD.

City  
SILOAM SPRINGSState  
ARZip Code  
72761-8249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.48

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690860**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANE, DAVINA, , ,**

Mailing Address 11323 PACIFIC ST.

City  
COLUMBIAState  
CAZip Code  
95310-9603FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.50

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692083**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LARIMER, ROBERT, S., ,**

Mailing Address 6110 BAYOU CROSSING DRIVE

City  
ALEXANDRIAState  
LAZip Code  
71303-7002FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SOUND PHYSICIANOccupation (for Individual)  
HOSPITALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

403.66

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691420**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

237.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3209 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAYO, LEWIS, DANIEL, MR., SR.**

Mailing Address 2316 W VINE ST

City  
LODIState  
CAZip Code  
95242-3727FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

H&amp;R BLOCK TAX GROUP

Occupation (for Individual)

ENROLLED AGENT/TAX PREPARATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.95

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690828**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAYTON, ANTHONY, , ,**

Mailing Address 15 SW B AVE

City

LAWTON

State

OK

Zip Code

73501-4006

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

PROSTHETIST AND ORTHOTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692716**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City

CYNTHIANA

State

KY

Zip Code

41031-4632

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

696.06

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691240**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

144.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3210 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEBRET, ARTHUR, M., ,**

Mailing Address 621 S FREYA ST

City  
SPOKANEState  
WAZip Code  
99202-5138FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692305**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690193**

Amount of Each Receipt this Period

76.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEE, RICHARD, T., MR.,**

Mailing Address P.O. BOX 2113

City  
ORLANDOState  
FLZip Code  
32802-2113FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

901.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692798**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

222.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3211 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEONARD, ANNE, , ,**

Mailing Address 13202 HUNTERS SPRING

City  
SAN ANTONIOState  
TXZip Code  
78230-2862FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AHAOccupation (for Individual)  
SMA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.86

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691929**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEONARD, ANNE, , ,**

Mailing Address 13202 HUNTERS SPRING

City  
SAN ANTONIOState  
TXZip Code  
78230-2862FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AHAOccupation (for Individual)  
SMA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.86

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692053**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LERNER, GLENN, , ,**

Mailing Address 445 EL CAMINO DEL MAR

City  
SAN FRANCISCOState  
CAZip Code  
94121-1039FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.27

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692142**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3212 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKERState  
COZip Code  
80138-8221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690604

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKERState  
COZip Code  
80138-8221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690605

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKERState  
COZip Code  
80138-8221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690607

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.91



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3213 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWIS, FRED, , MR.,**

Mailing Address 8914 PINEY CREEK RD

City  
PARKERState  
COZip Code  
80138-8221FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690613**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LINDSEY, RICHARD, , ,**

Mailing Address 1175 RICHMOND CT

City  
MOBILEState  
ALZip Code  
36695-3558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LINDSEY & WALDOOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692693**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINDSEY, TOMMY, , MR.,**

Mailing Address 11222 LONG BRANCH DR.

City  
AUSTINState  
TXZip Code  
78736-6505FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

655.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692303**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3214 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOGSDON, NORMAN , , ,**

Mailing Address 5940 HAVENS TRL

City  
TYLERState  
TXZip Code  
75707-6402FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TIDEWATER MARINEOccupation (for Individual)  
MARINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.58

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692324**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOUGHNEY, ROBERT, D., MR.,**

Mailing Address 2316 GOLDSMITH ST

City  
HOUSTONState  
TXZip Code  
77030-1130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOUGHNEY CONSULTING INC.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.36

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692145**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOUGHNEY, ROBERT, D., MR.,**

Mailing Address 2316 GOLDSMITH ST

City  
HOUSTONState  
TXZip Code  
77030-1130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOUGHNEY CONSULTING INC.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

601.36

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692147**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3215 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOUGHNEY, ROBERT, D., MR.,**

Mailing Address 2316 GOLDSMITH ST

City  
HOUSTONState  
TXZip Code  
77030-1130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOUGHNEY CONSULTING INC.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692151**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOUGHNEY, ROBERT, D., MR.,**

Mailing Address 2316 GOLDSMITH ST

City  
HOUSTONState  
TXZip Code  
77030-1130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOUGHNEY CONSULTING INC.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692152**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOUGHNEY, ROBERT, D., MR.,**

Mailing Address 2316 GOLDSMITH ST

City  
HOUSTONState  
TXZip Code  
77030-1130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOUGHNEY CONSULTING INC.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

601.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692162**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3216 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUBIT, FREDRIC, , ,**

Mailing Address 28 GRAVEL HILL RD

City  
KINNELONState  
NJZip Code  
07405-2245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NJEOccupation (for Individual)  
HEALTHCARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.29

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690730**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUTE, TERRY, , ,**

Mailing Address 318 LAKE ST.

City  
BRIDGE CITYState  
TXZip Code  
77611-4322FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MCFADDIN WARD INC.Occupation (for Individual)  
SECURITY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.94

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690735**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUTHER, ROBERT, , MR.,**

Mailing Address 2201 LAUREL OAK DRIVE

City  
VALENCIAState  
PAZip Code  
16059-8776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.16

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691520**

Amount of Each Receipt this Period

19.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3217 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUTHER, ROBERT, , MR.,**

Mailing Address 2201 LAUREL OAK DRIVE

City  
VALENCIAState  
PAZip Code  
16059-8776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.16

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692699**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LYLES, RICHARD, A., ,**

Mailing Address 27211. MILLER. STREET

City  
PORT NECHESState  
TXZip Code  
77651-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691926**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LYONS, DOTTIE, , MRS.,**

Mailing Address 914 FAIRWAY VISTA DR.

City  
SANTA MARIAState  
CAZip Code  
93455-1520FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690746**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.10

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3218 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LYONS, GEORGE, , ,

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534-5242FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1658.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690865

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LYONS, GEORGE, , ,

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534-5242FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1658.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690872

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LYONS, GEORGE, , ,

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534-5242FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1658.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692838

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.89

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3219 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LYSTER, ELOISE, , ,**

Mailing Address P.O. BOX 28

City  
BENDState  
ORZip Code  
97709-0028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690939**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MA, CAROL, , ,**

Mailing Address 3411 WALES COURT

City

ROWLAND HEIGHTS

State

CA

Zip Code

91748-5139

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691139**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MA, HOMER, , ,**

Mailing Address 1819 HAPP RD

City

NORTHBROOK

State

IL

Zip Code

60062-5640

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693021**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3220 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MA, HOMER, , ,**

Mailing Address 1819 HAPP RD

City  
NORTHBROOKState  
ILZip Code  
60062-5640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27693024

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MA, HOMER, , ,**

Mailing Address 1819 HAPP RD

City  
NORTHBROOKState  
ILZip Code  
60062-5640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27693026

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MA, HOMER, , ,**

Mailing Address 1819 HAPP RD

City  
NORTHBROOKState  
ILZip Code  
60062-5640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27693028

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.91



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3221 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MA, HOMER, , ,**

Mailing Address 1819 HAPP RD

City  
NORTHBROOKState  
ILZip Code  
60062-5640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693029**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MA, HOMER, , ,**

Mailing Address 1819 HAPP RD

City  
NORTHBROOKState  
ILZip Code  
60062-5640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693033**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MADER, PATRICIA, M., MRS.,**

Mailing Address 1710 HUDSON CIR

City  
GRAND ISLANDState  
NEZip Code  
68801-7473FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

734.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691558**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3222 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANN, GERALD, D., MR., II**

Mailing Address 8102 BAYBERRY CT

City  
INDIANAPOLISState  
INZip Code  
46250-1629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MANN PROPERTY LLPOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.05

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691206**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANSUR, JOSEPH, M., ,**

Mailing Address 6224 LYNN WAY

City  
SAINT PAULState  
MNZip Code  
55129-8401FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691441**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANTHEI, LEAH, , MS.,**

Mailing Address 46646 COUNTY ROAD 613

City  
NASHWAUKState  
MNZip Code  
55769-4515FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.39

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690756**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

351.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3223 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARKLEY, BARBARA, , ,**

Mailing Address 330 ALESSANDRA CIRCLE

City  
ORANGE CITYState  
FLZip Code  
32763-7859FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690344

Amount of Each Receipt this Period

5.42

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARKS, SUSAN, , MS.,**

Mailing Address 465 N PRAIRIE DR.

City  
OCONOMOWOCState  
WIZip Code  
53066-8626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692399

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARSH, ISAAC, E., ,**

Mailing Address 70 MARROW

City  
NEWARKState  
NJZip Code  
07103-3131FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EMPLOYEDOccupation (for Individual)  
HEALTH CARE PROVIDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690386

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3224 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692939**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.39

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691223**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

832.39

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692769**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3225 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692833**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASTERS, BARBARA, , ,**

Mailing Address 3405 W 23 STREET

City  
GREELEYState  
COZip Code  
80634-7503FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NCMC -HOSPITALOccupation (for Individual)  
PBX-OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690983**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATHEWS, ASTRIDA, , ,**

Mailing Address 26905 W WAHALLA LN

City  
BUCKEYEState  
AZZip Code  
85396-2337FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

211.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691610**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3226 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATULA, LOIS, , ,**

Mailing Address 580 FREEMAN LANE

City  
LA VERNIAState  
TXZip Code  
78121-2102FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SALES ASSOCIATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693127**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAXWELL, GEORGE, , ,**

Mailing Address 305 12TH TERRACE

City  
INDIALANTICState  
FLZip Code  
32903-4313FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692569**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAXWELL, TAYLOR, H., MR.,**

Mailing Address 9121 SOUTHMONT CV206

City  
FORT MYERSState  
FLZip Code  
33908-6308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692611**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3227 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAYS, JUSTIN, , ,**

Mailing Address 17269 OHARA DRIVE

City  
PORT CHARLOTTEState  
FLZip Code  
33948-2283FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WORKSITEOccupation (for Individual)  
FINANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1041.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691739

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MC DONALD, MELODY, L., MRS.,**

Mailing Address 1098 VERNIER PLACE

City  
STANFORDState  
CAZip Code  
94305-1027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691515

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCLINTOCK, JOHN, , ,**

Mailing Address 770 SANDY RUN RD

City  
YARDLEYState  
PAZip Code  
19067-2923FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KELLER WILLIAMS REAL ESTATEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691910

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

724.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3228 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCLOSKEY, KAREN, , ,**

Mailing Address 529 ZANZIBAR ST

City  
MORRO BAYState  
CAZip Code  
93442-2981FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.79

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691563**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCLUGGAGE, VICTORIA, , ,**

Mailing Address 1415 PARKVIEW AVENUE

City  
PASADENAState  
CAZip Code  
91103-2361FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692877**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.36

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692551**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.02



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3229 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692554**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCOOL, CYNTHIA, , ,**

Mailing Address 604 FREDERICK DR.

City  
CLEVELANDState  
MSZip Code  
38732-2006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692564**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCOY, CINDY, C., MS.,**

Mailing Address 8608, CALERA DRIVE

City  
AUSTINState  
TXZip Code  
78735-1570FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

503.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691963**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3230 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCELREATH, JAMES, , ,**

Mailing Address 1701SHADYDIDE

City  
EAST LIVERPOOLState  
OHZip Code  
43920-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691118**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCELREATH, JAMES, , ,**

Mailing Address 1701SHADYDIDE

City  
EAST LIVERPOOLState  
OHZip Code  
43920-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691765**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCKINNEY, SARA, , ,**

Mailing Address 808 RIVIERA AVE

City  
DAVENPORTState  
FLZip Code  
33897-6850FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

473.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692031**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3231 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCKINNEY, SARA, , ,**

Mailing Address 808 RIVIERA AVE

City  
DAVENPORTState  
FLZip Code  
33897-6850FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692382**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNAIR, KRISTEN, , ,**

Mailing Address 2 OLD JAMESTOWN LANE

City  
FLORISSANTState  
MOZip Code  
63034-1809FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690620**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCNEIL, COLLIN, , ,**

Mailing Address 1701 HORSESHOE TRAIL

City  
CHESTER SPRINGSState  
PAZip Code  
19425-1814FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

801.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691218**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

340.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3232 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCPHERSON, JEFFREY, , ,**

Mailing Address 111 TAYLOR STREET

City  
GRANBYState  
MAZip Code  
01033-9522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692678**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEEHAN, JOAN, , ,**

Mailing Address 2874 GOLDEN GATE AVE

City  
SAN FRANCISCOState  
CAZip Code  
94118-4111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1962.85

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690365**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEIER, CURT, E., MR.,**

Mailing Address 4721 RD 18

City  
LAGRANGEState  
WYZip Code  
82221-8410FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STATE OF WYOOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.94

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691743**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3233 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MESSINA, JILL, A., ,**

Mailing Address 1374 MIDLAND AVE APT 215

City  
BRONXVILLEState  
NYZip Code  
10708-6850FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.38

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691398**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MESSINA, JILL, A., ,**

Mailing Address 1374 MIDLAND AVE APT 215

City  
BRONXVILLEState  
NYZip Code  
10708-6850FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.38

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691464**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. METHA, RONALD, , ,**

Mailing Address PO BOX1286

City  
LITCHFIELD PARKState  
AZZip Code  
85340-1286FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.64

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691348**

Amount of Each Receipt this Period

22.77

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

230.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3234 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEYER, MARK, J., MR.,**

Mailing Address 2002 COLINA CT

City  
ATLANTIC BEACHState  
FLZip Code  
32233-4530FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BKFS, INC.Occupation (for Individual)  
APPLICATION DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.13

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691936**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, ANNE, , ,**

Mailing Address 6 RONNA RD

City  
GLOUCESTERState  
MAZip Code  
01930-1665FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1006.86

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692185**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, CLIFFORD, , ,**

Mailing Address 332 BERRYSBURG RD

City  
MILLERSBURGState  
PAZip Code  
17061-1401FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

397.97

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690532**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.54

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3235 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, CLIFFORD, , ,**

Mailing Address 332 BERRYSBURG RD

City  
MILLERSBURG

State  
PA

Zip Code  
17061-1401

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.97

Date of Receipt

**02** / **15** / **2025**

**Transaction ID : SA11A.27690541**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, JAMES, E., ,**

Mailing Address 2235 DEXTER RD.

City  
AUBURN HILLS

State  
MI

Zip Code  
48326-2307

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.37

Date of Receipt

**02** / **15** / **2025**

**Transaction ID : SA11A.27690202**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, JAMES, E., ,**

Mailing Address 2235 DEXTER RD.

City  
AUBURN HILLS

State  
MI

Zip Code  
48326-2307

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

471.37

Date of Receipt

**02** / **15** / **2025**

**Transaction ID : SA11A.27690423**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

43.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3236 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELLState  
NMZip Code  
88201-8659FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.16

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691055**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOCK, WILLIAM, , ,**

Mailing Address 923 6TH AVENUE

City  
ALBANYState  
GAZip Code  
31701-1742FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.88

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691915**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOORE, ROBERT, L., ,**

Mailing Address 13994 NEWBERG

City  
CAT SPRINGState  
TXZip Code  
78933-5237FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691133**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3237 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOORMAN, FRANCES, S., MRS.,**

Mailing Address 11207 BUSHIRE DRIVE

City  
DALLASState  
TXZip Code  
75229-4106FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.89

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27693060**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORRIS, ANJALI, , ,**

Mailing Address 863-C SAN PABLO AVENUE

City  
ALBANYState  
CAZip Code  
94706-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.56

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691486**

Amount of Each Receipt this Period

45.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUELLER, BARBARA, , ,**

Mailing Address 8020 SAILBOAT KEY BLVD S, APT 305

City  
SAINT PETERSBURGState  
FLZip Code  
33707-4415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691683**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

169.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3238 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUELLER, ROBERT, , ,**

Mailing Address 2511 COUNTRY POINTE LANE

City  
WENTZVILLEState  
MOZip Code  
63385-5434FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690271**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MUNS, MATT, , ,**

Mailing Address 3041 FLAMING CIRCLE

City  
SOUTHLAKEState  
TXZip Code  
76092-2939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AGR, LLCOccupation (for Individual)  
BIZ CONSULTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.68

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691576**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

955.83

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691419**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

216.83

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3239 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYN

State  
VA

Zip Code  
23936-9412

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

**02** / **15** / **2025**

**Transaction ID : SA11A.27691478**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYN

State  
VA

Zip Code  
23936-9412

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

**02** / **15** / **2025**

**Transaction ID : SA11A.27691512**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MYERS, JAMES, , ,**

Mailing Address 232 SHADY HILL DR

City  
RICHARDSON

State  
TX

Zip Code  
75080-2035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

**02** / **15** / **2025**

**Transaction ID : SA11A.27691597**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

257.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3240 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSEN, PATRICIA, , ,**

Mailing Address 10026 LLEWELLYN COURT

City  
FAIRFAXState  
VAZip Code  
22032-2713FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DODOccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.30

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690668**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, EDWARD, , ,**

Mailing Address 8830 MCAVOY DR.

City  
HOUSTONState  
TXZip Code  
77074-7310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.08

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691925**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, KAY, , ,**

Mailing Address 4518. 7TH ST

City  
LUBBOCKState  
TXZip Code  
79416-4713FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.50

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691277**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3241 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, MIKE, G., ,**

Mailing Address 711 E 3230 N

City  
LEHIState  
UTZip Code  
84043-2910FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.42

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690696**

Amount of Each Receipt this Period

23.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEMEROFF, EILEEN, , ,**

Mailing Address 20 POND CROSSING

City

SOUTHAMPTON

State

NY

Zip Code

11968-4728

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1332.43

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691829**

Amount of Each Receipt this Period

37.48

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEMEROFF, EILEEN, , ,**

Mailing Address 20 POND CROSSING

City

SOUTHAMPTON

State

NY

Zip Code

11968-4728

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1332.43

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27693163**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3242 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEWELL, LINDA, , ,**

Mailing Address 4324 SUMMER STAR LANE

City  
FORT WORTHState  
TXZip Code  
76244-4934FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.03

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690239**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEWHOUSE, BRENDA, , ,**

Mailing Address 665 S PEAR ORCHARD RD

City  
RIDGELANDState  
MSZip Code  
39157-4861FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.60

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27693084**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NICHOLS, CHARLES, , ,**

Mailing Address 14870 DUNLIN COURT

City  
MIDDLEFIELDState  
OHZip Code  
44062-9033FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
POLYCHEMOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.13

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691196**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3243 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NICHOLS, DORN, , ,**

Mailing Address 66101 US 33

City  
GOSHENState  
INZip Code  
46526-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692412

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIEMANN, NANCY, , ,**

Mailing Address 18 DOGWOOD RD.

City  
MORRIS PLAINSState  
NJZip Code  
07950-1919FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

853.83

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692389

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NORTON, DONALD, W., MR.,**

Mailing Address 1625 LONDON AVE

City  
MANTECAState  
CAZip Code  
95336-7011FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STOCKTON UNIFIED SCHOOL DISTRICTOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.76

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27693099

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

149.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3244 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOYES, RITA, S., MRS.,**

Mailing Address 4070 FOUNDERS CLUB DR.

City  
SARASOTAState  
FLZip Code  
34240-1441FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692922

Amount of Each Receipt this Period

7.77

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NUCKOLS, GAIL, , MS.,**

Mailing Address 13144 RD.216

City  
PORTERVILLEState  
CAZip Code  
93257-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GAIL NUCKOLSOccupation (for Individual)  
CATER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691947

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'FLYNN, ARMINDA, , ,**

Mailing Address 12864 BISCAYNE BLVD

City  
N. MIAMIState  
FLZip Code  
33181-2007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

992.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691252

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

91.21



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3245 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OAK, ALAN, , MR.,**

Mailing Address 5104 BONHAM RD

City  
OXFORDState  
OHZip Code  
45056-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.83

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691327**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLBON, DENISE, , ,**

Mailing Address 1861 LILBURN STONE MOUNTAIN ROAD

City  
STONE MOUNTAINState  
GAZip Code  
30087-1700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692505**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLSEN, RORY, , ,**

Mailing Address 11007 CRANBROOK ROAD

City  
HOUSTONState  
TXZip Code  
77042-1327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.30

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692032**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3246 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLSON, SHARON, , ,**

Mailing Address 1239 O'LEARY DRIVE

City  
JOLIETState  
ILZip Code  
60431-8954FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691165

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OPDYCKE, NICOLA, , ,**

Mailing Address 2202 MIRAMONTE WAY

City  
NAPLESState  
FLZip Code  
34105-3074FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692251

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ORPHALI, VERONA, , ,**

Mailing Address 140 CANONWOOD DR.

City  
GLENDALEState  
CAZip Code  
91207-1055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONEOccupation (for Individual)  
HEALTH CARE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691093

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3247 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ORPHALI, VERONA, , ,**

Mailing Address 140 CANONWOOD DR.

City  
GLENDALEState  
CAZip Code  
91207-1055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NONEOccupation (for Individual)  
HEALTH CARE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692218**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSBORNE, LARRY, O., MR.,**Mailing Address 1933 EAGLE DR  
TRLR DCity  
MORRISState  
ILZip Code  
60450-6817FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692754**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PACE, EDWARD, , ,**

Mailing Address 9412 CRESCENT BAR RD

City  
QUINCYState  
WAZip Code  
98848-9121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

372.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692662**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

206.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3248 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAGEL, ANITA, , ,**

Mailing Address 100 NORTH OLIVE STREET

City  
SAINT ELMOState  
ILZip Code  
62458-1443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PAGEL FUNERAL HOMESOccupation (for Individual)  
FUNERAL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691654**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAINTER, GLORIA, , ,**

Mailing Address 2516 BARBADOS DRIVE

City  
GAUTIERState  
MSZip Code  
39553-6762FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690188**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAIS, MEG, , ,**

Mailing Address 530 RIDGECREST RD

City  
AKRONState  
OHZip Code  
44303-1341FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SIRVAOccupation (for Individual)  
EVP HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690683**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3249 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALMER, DARREL, , ,**

Mailing Address 22752 SERENITY LANE

City  
NISSWAState  
MNZip Code  
56468-7518FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENERGY MANAGEMENT RESOURCESOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691506**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PALMER, LORETTA, , ,**

Mailing Address 1215 ANCHORS WAY DR. SPCE 140

City  
VENTURAState  
CAZip Code  
93001-0277FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691587**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PANDINA, ANTHONY, , ,**

Mailing Address 20413 NE 161ST ST

City  
BRUSH PRAIRIEState  
WAZip Code  
98606-6707FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

296.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692173**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

260.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3250 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PANG, JENNIE, A., ,**

Mailing Address 1428 ALEWA DR.

City  
HONOLULUState  
HIZip Code  
96817-1203FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.80

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691254**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAPPAS, MARY, ALICE, MS.,**

Mailing Address 1617 N FLAGLER DR APT 4A

City  
WEST PALM BEACHState  
FLZip Code  
33407-6506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.64

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692470**

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAPPAS, MARY, ALICE, MS.,**

Mailing Address 1617 N FLAGLER DR APT 4A

City  
WEST PALM BEACHState  
FLZip Code  
33407-6506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.64

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692496**

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3251 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAPPAS, MARY, ALICE, MS.,**

Mailing Address 1617 N FLAGLER DR APT 4A

City  
WEST PALM BEACHState  
FLZip Code  
33407-6506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2025

**Transaction ID : SA11A.27692499**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAPPAS, MARY, ALICE, MS.,**

Mailing Address 1617 N FLAGLER DR APT 4A

City  
WEST PALM BEACHState  
FLZip Code  
33407-6506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2025

**Transaction ID : SA11A.27692501**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKER, ROBERT, , ,**

Mailing Address 6495 FARM TO MARKET RD

City  
WHITEFISHState  
MTZip Code  
59937-8392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
GM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2025

**Transaction ID : SA11A.27690492**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3252 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAULL, RANDALL, S., MR.,**

Mailing Address 13407 GRENOBLE DR.

City  
ROCKVILLEState  
MDZip Code  
20853-2834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NVR INC.Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692104**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, EDWIN, , ,**

Mailing Address 2061 SE ACADEMY ST

City  
DALLASState  
ORZip Code  
97338-1965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.11

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691304**

Amount of Each Receipt this Period

9.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PEARSON, CLAYTON, , ,**

Mailing Address 16110 JERALD RD

City  
LAURELState  
MDZip Code  
20707-2613FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BFPEOccupation (for Individual)  
FIRE ALARM TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691225**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

217.24



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3253 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PELTIER, LARRY, , MR.,**

Mailing Address 2432 E ALDEN ST

City  
SIMI VALLEYState  
CAZip Code  
93065-2308FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691561**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERKINS-LEONE, PATRICIA, , MRS.,**

Mailing Address 2 QUEENS COURT

City  
ATHERTONState  
CAZip Code  
94027-5409FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

HOMEMAKER

Occupation (for Individual)

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692278**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERRY, FRED, M., MR.,**

Mailing Address 2628 N SALISBURY ST

City  
WEST LAFAYETTEState  
INZip Code  
47906-1430FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

673.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692962**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1134.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3254 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORGState  
VAZip Code  
23860-8229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.35

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690228**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORGState  
VAZip Code  
23860-8229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.35

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690333**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.11

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691715**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3255 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PHELPS, CECILLE, H., MRS.,**

Mailing Address 2599 GROVER HARDEE RD

City  
GREENVILLEState  
NCZip Code  
27858-9154FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692559**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHIPPS, ALLEN, M., MR.,**

Mailing Address 925 WHITEHALL LN

City  
REDWOOD CITYState  
CAZip Code  
94061-3686FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.33

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690394**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PICKLE, JAMES, , ,**

Mailing Address 8260 CHULA CREEK RD

City  
CHATTANOOGAState  
TNZip Code  
37421-3283FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

241.85

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691942**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

231.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3256 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIERCE, ARLENE, , ,**

Mailing Address 4931 ELMGATE DR.

City  
ORCHARD LAKEState  
MIZip Code  
48324-3012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692767**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PINCHES, CYNTHIA, , ,**

Mailing Address 16 BUNKER HILL ROAD

City  
NEW BRITAINState  
CTZip Code  
06053-2206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1376.26

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690723**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PINCHES, CYNTHIA, , ,**

Mailing Address 16 BUNKER HILL ROAD

City  
NEW BRITAINState  
CTZip Code  
06053-2206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1376.26

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690750**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3257 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PISTORINO, MARIA, , MS.,**

Mailing Address 6535 SW 123RD STREET

City  
PINECRESTState  
FLZip Code  
33156-5554FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

983.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692262**

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PLOWMAN, HARLAN, A., MR.,**

Mailing Address 1062 7TH ST

City  
GLEN BURNIEState  
MDZip Code  
21060-6758FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692790**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POMEROY, PATTI, , ,**

Mailing Address 902 SILVER ST

City  
PRINCETONState  
TXZip Code  
75407-2281FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691504**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

58.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3258 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690470**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POZZI, ROBERT, J., ,**

Mailing Address 3733 FALSTONE ROAD

City  
RICHMONDState  
VAZip Code  
23234-3769FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691564**

Amount of Each Receipt this Period

42.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PREMO, TERRY, , ,**

Mailing Address 1409 EVERGREEN PARK DR. SW - 301

City  
OLYMPIAState  
WAZip Code  
98502-5827FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692167**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3259 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PREMIO, TERRY, , ,**

Mailing Address 1409 EVERGREEN PARK DR. SW - 301

City  
OLYMPIAState  
WAZip Code  
98502-5827FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692458**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRESTAGE, MARSHA, K., MS.,**

Mailing Address 406 COHARIE DR.

City  
CLINTONState  
NCZip Code  
28328-3014FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690889**

Amount of Each Receipt this Period

198.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRICE, JENNIE, , ,**

Mailing Address 9949 N CROOK LN

City  
TUCSONState  
AZZip Code  
85742-8653FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692434**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

278.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3260 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PYLE, DON, , ,**

Mailing Address 4 BLAISDELL ST

City  
AUGUSTAState  
MEZip Code  
04330-6902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692542

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAGLAND, ELOISE, , MS.,**

Mailing Address 1815 SHERRY LEA DR.

City  
NEOSHOState  
MOZip Code  
64850-2930FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RAGLAND MILLS INCORPORATEDOccupation (for Individual)  
PRESIDENT OF COMPANY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690531

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAINWATER, DAVID, , ,**

Mailing Address 109 EAST 14TH AVE

City  
CORDELEState  
GAZip Code  
31015-1446FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691209

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

172.24



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3261 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAK, HENRY, , ,**

Mailing Address 2 VILLAGE DRIVE

City  
TRUMBULLState  
CTZip Code  
06611-4800FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.43

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690623**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RANKIN, DEBRA, CONNOR, MS.,**

Mailing Address 542 MOUNT OLIVE CHURCH RD.

City  
TIFTONState  
GAZip Code  
31794-2628FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692237**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693027**

Amount of Each Receipt this Period

22.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3262 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAUSCH, BARBARA, , MS.,**

Mailing Address 7211 N VIA DE PAESIA

City  
SCOTTSDALEState  
AZZip Code  
85258-3739FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692524**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REEDER, KENT, , ,**

Mailing Address 3899 ORCHARD LN

City  
BEULAHState  
MIZip Code  
49617-9675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REEDERREN-OOccupation (for Individual)  
SELF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.06

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692553**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REINHARD, ROSEMARIE, , MR.,**

Mailing Address 2755 FALCON STREET

City  
EAST MEADOWState  
NYZip Code  
11554-4318FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

505.15

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690955**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3263 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RENSKI, RONALD, , ,**

Mailing Address 2700 OCEAN SHORE BLVD, UNIT 403

City  
ORMOND BEACHState  
FLZip Code  
32176-2395FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692445**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RICE, SUNDAY, , ,**

Mailing Address 2301 BROOKSTONE CENTRE PARKWAY

City  
COLUMBUSState  
GAZip Code  
31904-9248FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SUNDAY COSTOS RICEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692347**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICHARDSON, CHRIS, , ,**

Mailing Address 4001 W SAM HOSUTON PKWY N STE 100

City  
HOUSTONState  
TXZip Code  
77043-1236FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BLAZER BUILDINGOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691391**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3264 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690800**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691324**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691328**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3265 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691330

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691334

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691337

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3266 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RINDLAUB, SARAH, S., MS.,**Mailing Address 8441 SE 68TH ST.  
#217City  
MERCER ISLANDState  
WAZip Code  
98040-5235FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692500**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690677**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690684**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3267 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690692

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690694

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690697

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3268 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690738**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, DALE, , ,**

Mailing Address 104 BRANNON LANE

City  
TROYState  
ALZip Code  
36079-8203FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.71

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27693132**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODACK, MARK, , ,**Mailing Address 16051 COLLINS AVE  
3502City  
NORTH MIAMI BEACHState  
FLZip Code  
33160-4624FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

782.88

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692882**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3269 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, CLAUDETTE, C., MS.,**

Mailing Address 24290 HATTERAS ST

City  
WOODLAND HILLSState  
CAZip Code  
91367-3937FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690641**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROHRIG, SHELLEY, J., ,**

Mailing Address 49 MASER AVENUE

City  
WHEELINGState  
WVZip Code  
26003-7246FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691836**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROONEY, RANDALL, , ,**

Mailing Address 101 ONEILL CT

City  
FOLSOMState  
CAZip Code  
95630-2379FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690818**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3270 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROUSE, EPIFANIA, , ,**Mailing Address 7862 SAILBOAT KEY BLVD S  
501City  
SOUTH PASADENAState  
FLZip Code  
33707-6359FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691702**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691141**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691641**

Amount of Each Receipt this Period

3.09

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

56.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3271 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691858**

Amount of Each Receipt this Period

1.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692734**

Amount of Each Receipt this Period

1.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692736**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3272 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692986**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUFFER, JUDY, M., ,**

Mailing Address 380 ROBIN LN

City  
TITUSState  
ALZip Code  
36080-2818FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690342**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUFFER, JUDY, M., ,**

Mailing Address 380 ROBIN LN

City  
TITUSState  
ALZip Code  
36080-2818FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690345**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

92.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3273 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690523**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUGGIERI, THOMAS, , MR.,**

Mailing Address 115 HAWTHORNE LN

City

PHOENIXVILLE

State

PA

Zip Code

19460-2731

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691332**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City

IRVINE

State

CA

Zip Code

92604-2216

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690938**

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3274 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692657**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANCHEZ, JOSE, , ,**

Mailing Address 10606 WAYNE AVENUE

City  
LUBBOCKState  
TXZip Code  
79424-7417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
XFABOccupation (for Individual)  
MFG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692891**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SASSER, KEVIN, , ,**

Mailing Address 2201 N WRIGHT ST

City  
SANTA ANAState  
CAZip Code  
92705-7162FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691806**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3275 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHILDKNECHT, RAINER, F., MR.,**

Mailing Address 211 WOODLAWN AVE

City  
WINNETKAState  
ILZip Code  
60093-1552FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691774**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHLAGETER, FRANK, , MR.,**

Mailing Address 4420 N.E. 28TH AVENUE

City  
POMPANO BEACHState  
FLZip Code  
33064-7222FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692742**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHOENHALS, RICHARD, , ,**

Mailing Address P.O. BOX 2075

City  
WEATHERFORDState  
OKZip Code  
73096-8075FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROSSPOINTE CHURCHOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

715.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691795**

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3276 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692140**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCULLY, MARLYNN, V., ,**

Mailing Address 771 MANATEE COVE

City  
VERO BEACHState  
FLZip Code  
32963-3730FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27693078**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEAMAN, HENRY, , ,**Mailing Address 9801 HARMONY WOODS WAY  
APT 209City  
HENRICOState  
VAZip Code  
23233-3008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DOMINION ENERGYOccupation (for Individual)  
SR. FUEL SUPPLY COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.16

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691134**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.93



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3277 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEAMAN, HENRY, , ,**Mailing Address 9801 HARMONY WOODS WAY  
APT 209City  
HENRICOState  
VAZip Code  
23233-3008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DOMINION ENERGYOccupation (for Individual)  
SR. FUEL SUPPLY COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691154**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEARS, JAMES, D., MR.,**

Mailing Address PO BOX 15956

City  
LITTLE ROCKState  
ARZip Code  
72231-5956FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690329**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEGRAVES, GILDA, G., ,**

Mailing Address 14236 S SWAN RD

City  
GULFPORTState  
MSZip Code  
39503-9073FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

661.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691684**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3278 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEIFERT, WILLIAM, , , JR.**

Mailing Address 345 LONG MEADOW DR

City  
FREDERICKSBURGState  
VAZip Code  
22406-4977FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CSRAOccupation (for Individual)  
MASTER INTEL ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.59

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692961**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEIFERT, WILLIAM, , , JR.**

Mailing Address 345 LONG MEADOW DR

City  
FREDERICKSBURGState  
VAZip Code  
22406-4977FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CSRAOccupation (for Individual)  
MASTER INTEL ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.59

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692963**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEPTON, GAYLE, , ,**

Mailing Address 150E LAKESHORE DR. #72

City  
LAKE ELSINOREState  
CAZip Code  
92530-4241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

565.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691204**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3279 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEPHTON, GAYLE, , ,**

Mailing Address 150E LAKESHORE DR. #72

City  
LAKE ELSINOREState  
CAZip Code  
92530-4241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692452**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHAW, DAVID, L., DR.,**

Mailing Address 225 COLEWOOD WAY

City  
ATLANTAState  
GAZip Code  
30328-2922FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.25

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692482**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHAYS, LORRAINE, , ,**

Mailing Address 14659 CANALVIEW DRIVE APT A

City  
DELRAY BEACHState  
FLZip Code  
33484-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

483.21

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690430**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3280 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHECHTMAN, ARLEAH, , ,**

Mailing Address 1381 CREEKSIDE CT.

City  
KALISPELLState  
MTZip Code  
59901-9024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
THERAPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.06

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692588**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHELLEY, WILLIAM, , MR.,**

Mailing Address 481 SOUTH MANY LAKES DR.

City  
KALISPELLState  
MTZip Code  
59901-8396FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.88

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690690**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHERROD, CLIFFORD, , ,**

Mailing Address 28900 SOUTH SONCY ROAD

City  
CANYONState  
TXZip Code  
79015-6420FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

599.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690391**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3281 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOEMAKER, ROBERT, , ,**

Mailing Address 925 ROSCOMMON DRIVE

City  
BRYN MAWRState  
PAZip Code  
19010-1842FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PHILMONT GUIDANCEOccupation (for Individual)  
PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691450**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHUGER, JILL, , ,**

Mailing Address N7756 BUSHEY RD

City  
TREGOState  
WIZip Code  
54888-9327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691373**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SICA, SUSAN, , ,**

Mailing Address 6021 E SMOKEHOUSE TRL

City  
SCOTTSDALEState  
AZZip Code  
85266-8204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691912**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3282 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIMPSON, BARBRA, , ,**

Mailing Address 872 5TH STREET

City  
MANHATTAN BEACHState  
CAZip Code  
90266-6664FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692817**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SINCLAIR, PATRICIA, N., MRS.,**

Mailing Address 1739 N TULARE WAY

City  
UPLANDState  
CAZip Code  
91784-1961FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690693**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SINCLAIR, PATRICIA, N., MRS.,**

Mailing Address 1739 N TULARE WAY

City  
UPLANDState  
CAZip Code  
91784-1961FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690758**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3283 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINTIM-DAMOA, KWABENA, , ,**

Mailing Address 30 EMPRESS CT

City  
FREEHOLD

State  
NJ

Zip Code  
07728-4304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.22

Date of Receipt

02 / 15 / 2025

**Transaction ID : SA11A.27690612**

Amount of Each Receipt this Period

58.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIPES, KATHLEEN, , ,**

Mailing Address 130 VALLEY VIEW DR.

City  
FINLEYVILLE

State  
PA

Zip Code  
15332-9409

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.85

Date of Receipt

02 / 15 / 2025

**Transaction ID : SA11A.27692749**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SISON, JOSEPHINE, , ,**

Mailing Address 822 LINCOLN STREET

City  
AMHERST

State  
OH

Zip Code  
44001-1059

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

02 / 15 / 2025

**Transaction ID : SA11A.27690296**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

207.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3284 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLACK, PAMELA, W., ,**

Mailing Address 3696 N. CHINA RD.

City  
BEAUMONTState  
TXZip Code  
77713-3394FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690767

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, DANIEL, G., MR.,**Mailing Address 7 WOODBINE RD  
APT 100City  
FLORHAM PARKState  
NJZip Code  
07932-2649FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692976

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, LINDA, NESTOR, ,**Mailing Address 700 PENN CENTER BLVD APT 403  
LAUREL VILLAGE APTSCity  
PITTSBURGHState  
PAZip Code  
15235-5916FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

273.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690364

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.08



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3285 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, RAYMOND, L., DR.,**

Mailing Address 2210 BRESSLER DRIVE

City  
WYOMISSINGState  
PAZip Code  
19610-1506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TOWERHEALTHOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690580**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, SHERMAN, L., MR.,**

Mailing Address 15011 SWEAT LOOP RD

City  
WIMAUMAState  
FLZip Code  
33598-5007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691591**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, SHENAL, , ,**

Mailing Address 266 BANGSBERG RD SE

City  
PORT CHARLOTTEState  
FLZip Code  
33952-9707FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691884**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

324.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3286 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, SHERMAN, L., MR.,**

Mailing Address 15011 SWEAT LOOP RD

City  
WIMAUMAState  
FLZip Code  
33598-5007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692054**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SNYDER, CARLA, , ,**

Mailing Address 15725 S. INDEPENDENCE CT., APT. 2W

City  
OAK FORESTState  
ILZip Code  
60452-3249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CCSSOccupation (for Individual)  
RESIDENTIAL MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.96

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690431**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOMERO, DAVID, , ,**

Mailing Address 53 WHEELER RD

City  
NEW IPSWICHState  
NHZip Code  
03071-3847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.16

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690593**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3287 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SORTMAN, DONNA, , ,**

Mailing Address 121 DOGWOOD LANE

City  
WILLIAMSPORTState  
PAZip Code  
17701-8828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691269**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOUTHERLAND, WYNONA, , ,**

Mailing Address 3095 FORREST DR

City  
FAIRBANKSState  
AKZip Code  
99709-5742FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691012**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691091**

Amount of Each Receipt this Period

3.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.38

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3288 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEINEBEL, BRIGITTE, , MS.,**Mailing Address 50 MOUNDS RD  
APT 415City  
SAN MATEOState  
CAZip Code  
94402-1291FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690398**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEINEBEL, BRIGITTE, , MS.,**Mailing Address 50 MOUNDS RD  
APT 415City  
SAN MATEOState  
CAZip Code  
94402-1291FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690984**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEINER, VALERIE, , ,**

Mailing Address 1505 FOREST PARK AVE

City  
VALPARAISOState  
INZip Code  
46385-3361FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690797**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3289 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEPHENS, LOUIS, C., ,**Mailing Address 1194 QUEENS RD  
CHARLOTTE NC 28209City  
CHARLOTTEState  
NCZip Code  
28207-1850FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JONES LANG LASALLEOccupation (for Individual)  
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692257**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEWART, JOHN, , ,**

Mailing Address 8612 JONES MILL RD

City  
CHEVY CHASEState  
MDZip Code  
20815-4819FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JONES GROUPOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693090**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STIEL, HUGH, , ,**

Mailing Address 601 N FORT LAUDETDALE BLVD

City  
FORT LAUDERDALEState  
FLZip Code  
33304-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690653**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

240.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3290 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STOKES, NORMA, T., MRS.,**

Mailing Address 34 CHESTNUT RIDGE DR.

City  
INMANState  
SCZip Code  
29349-4517FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690657**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOKES, PATSY, , ,**

Mailing Address 2092 GREY FOX LANE

City  
VIRGINIA BEACHState  
VAZip Code  
23456-5206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.59

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691273**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STORMENT, JOHN, B., MR.,**Mailing Address 6202 E MCKELLIPS RD  
UNIT 224City  
MESAState  
AZZip Code  
85215-2876FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

678.75

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690317**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

173.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3291 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STORMENT, JOHN, B., MR.,**Mailing Address 6202 E MCKELLIPS RD  
UNIT 224City  
MESAState  
AZZip Code  
85215-2876FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.75

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691724**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRAWBRIDGE, ROBERT, ALLEN, MR.,**

Mailing Address 120 VISION PARK BLVD 143

City  
CONROEState  
TXZip Code  
77384-3022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.28

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690713**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STUDINKA, JOYCE, , ,**

Mailing Address 145 WOODMONT DR

City  
BIRMINGHAMState  
ALZip Code  
35209-6627FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

347.38

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690209**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.44

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3292 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STURGILL, LARRY, , ,

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02		15		2025

Transaction ID : SA11A.27690283

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STURGILL, LARRY, , ,

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02		15		2025

Transaction ID : SA11A.27690795

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STURGILL, LARRY, , ,

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02		15		2025

Transaction ID : SA11A.27691972

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

46.86



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3293 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691705**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUGDEN, RICHARD, G., DR.,**Mailing Address 557 E BROADWAY  
BOX 70City  
JACKSONState  
WYZip Code  
83001-0070FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SUGDEN M.D. RICHOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690717**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SURPRENANT, LINDA, , ,**

Mailing Address 1016 FREEDOM LANE

City  
AUBREYState  
TXZip Code  
76227-2107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691427**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1046.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3294 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SURPRENANT, LINDA, , ,**

Mailing Address 1016 FREEDOM LANE

City  
AUBREYState  
TXZip Code  
76227-2107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692514**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUTPHEN, GEORGE, , MR.,**

Mailing Address 5501 SAWGRASS CT

City  
GARLANDState  
TXZip Code  
75044-5035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693098**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SWANSON, CLARA, , ,**

Mailing Address 10854 SUSIE LN.

City  
SANTEEState  
CAZip Code  
92071-5041FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692459**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

308.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3295 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SZALOCZI, IRENE, , ,**

Mailing Address 27 GRACE ST

City  
FORDSState  
NJZip Code  
08863-2101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692091**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULAState  
MTZip Code  
59804-5849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690156**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULAState  
MTZip Code  
59804-5849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

562.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690158**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3296 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULAState  
MTZip Code  
59804-5849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.60

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690159**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULAState  
MTZip Code  
59804-5849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.60

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690163**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULAState  
MTZip Code  
59804-5849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

562.60

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690169**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3297 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TERRY, JOHN, KENNETH, ,**

Mailing Address 517 COX DR.

City  
WEATHERFORDState  
TXZip Code  
76088-4905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690520**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THEVANAYAGAM, SAM, , ,**

Mailing Address 30 TWOSOME DRIVE

City  
MOORESTOWNState  
NJZip Code  
08057-1370FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PARTS LIFE INCOccupation (for Individual)  
PRESIDENT CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691140**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMSON, PAUL, , MR.,**

Mailing Address 606 CANDLEWOOD DRIVE

City  
CANON CITYState  
COZip Code  
81212-2033FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692571**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

390.54

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3298 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TILMA, TEE, , ,**

Mailing Address 406 ROCKHILL DR.

City  
SAN ANTONIO

State  
TX

Zip Code  
78209-2317

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025

**Transaction ID : SA11A.27691312**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TROYER, DENNIS, , ,**

Mailing Address 2192 GLEN COVE WAY

City  
HIGH POINT

State  
NC

Zip Code  
27265-9445

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.75

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025

**Transaction ID : SA11A.27691987**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TROYER, DENNIS, , ,**

Mailing Address 2192 GLEN COVE WAY

City  
HIGH POINT

State  
NC

Zip Code  
27265-9445

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

377.75

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025

**Transaction ID : SA11A.27691995**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

70.32

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3299 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TYPER, DONALD, R., MR.,

Mailing Address 410 N WEAVER ST

City  
HESSTONState  
KSZip Code  
67062-9041FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLC REALESTATE SERVICESOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691605

Amount of Each Receipt this Period

8.55

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TYPER, DONALD, R., MR.,

Mailing Address 410 N WEAVER ST

City  
HESSTONState  
KSZip Code  
67062-9041FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLC REALESTATE SERVICESOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692243

Amount of Each Receipt this Period

12.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ULZHEIMER, BOB, , ,

Mailing Address 4011 GUNNIN ROAD

City  
NORCROSSState  
GAZip Code  
30092-1949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690211

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

57.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3300 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ULZHEIMER, BOB, , ,

Mailing Address 4011 GUNNIN ROAD

City  
NORCROSSState  
GAZip Code  
30092-1949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690433

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ULZHEIMER, BOB, , ,

Mailing Address 4011 GUNNIN ROAD

City  
NORCROSSState  
GAZip Code  
30092-1949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690714

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ULZHEIMER, BOB, , ,

Mailing Address 4011 GUNNIN ROAD

City  
NORCROSSState  
GAZip Code  
30092-1949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692056

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.09



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3301 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UMBARGER, BRENDA, L., ,**

Mailing Address P.O. BOX 1774

City  
FRITCHState  
TXZip Code  
79036-1774FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690568

Amount of Each Receipt this Period

15.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. URBANO, LOURDES, , MRS.,**

Mailing Address 119 BRADLEE STREET

City  
HYDE PARKState  
MAZip Code  
02136-2225FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOHN HANCOCKOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690528

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. URBANO, LOURDES, , MRS.,**

Mailing Address 119 BRADLEE STREET

City  
HYDE PARKState  
MAZip Code  
02136-2225FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOHN HANCOCKOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

460.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690544

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

171.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3302 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. URREIZTIETA, IREL, , ,**

Mailing Address 180 KODIAK ST

City  
MORRO BAYState  
CAZip Code  
93442-3016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.55

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690930**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VALLEY, VIRGINIA, , ,**

Mailing Address 1401 EAST BAY AVE

City  
NEWPORT BEACHState  
CAZip Code  
92661-1428FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692368**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.29

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691699**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.40

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3303 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VANDER LEESE, ARLAND, KEITH, MR.,**

Mailing Address PO BOX 375

City  
SULLY

State  
IA

Zip Code  
50251-0375

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SALH TRANSPORT

Occupation (for Individual)  
TRANSPORTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1385.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

**Transaction ID : SA11A.27690378**

Amount of Each Receipt this Period

483.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VEGA, JORGE, , ,**

Mailing Address 1155 VALENCIA STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110-3026

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

**Transaction ID : SA11A.27690396**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VELDHUIZEN, DAVID, , ,**

Mailing Address 5350 E DEER VALLEY UNIT 2408

City

PHOENIX

State

AZ

Zip Code

85054-4158

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

**Transaction ID : SA11A.27691065**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

691.90

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3304 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VINES, WALTER, , MR.,

Mailing Address 174 MORRISON AVENUE

City  
STATEN ISLANDState  
NYZip Code  
10310-2835FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FDNYOccupation (for Individual)  
FIRE DEPARTMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692558

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VO, HONG, , ,

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690704

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VO, HONG, , ,

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692481

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

52.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3305 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VON ROHR, PHILIP, , ,**

Mailing Address 109 21ST STREET

City  
BELLEAIR BEACHState  
FLZip Code  
33786-3406FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.90

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691934**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VON SCHIMMELMANN, KAREN, , ,**

Mailing Address 12521 GRITSTONE DRIVE

City  
DENTONState  
TXZip Code  
76207-5747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.76

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690911**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAINSCOTT, AARON, , ,**

Mailing Address 2800 CHAD CT

City  
SACRAMENTOState  
CAZip Code  
95827-1310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HPSOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692604**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

310.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3306 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALKER, LUCINDA, , ,**

Mailing Address 67 IRVING AVENUE, P.O. BOX 507

City  
HYANNIS PORTState  
MAZip Code  
02647-0507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690754**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKERSMITH, NANCY, , ,**

Mailing Address 6827 WINKLE LANE

City  
CANYONState  
MNZip Code  
55717-8712FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691244**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALLS, DIANE JANE, , ,**

Mailing Address 1882 VISTA HILLS DR.

City  
NAVASOTAState  
TXZip Code  
77868-6966FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

697.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691837**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3307 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, DAVID, T., DR.,**

Mailing Address 3050 RIVERMEADE LN NW

City  
ATLANTAState  
GAZip Code  
30327-2016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.44

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692792**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEATHERMAN, GLENNA, F., ,**

Mailing Address 853 S NEWHAVEN DR.

City  
ORANGEState  
CAZip Code  
92869-5443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.95

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690995**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEBB, ROSS, A., MR.,**

Mailing Address 6312 N LE MAI AVE.

City  
CHICAGOState  
ILZip Code  
60646-4828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27690232**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3308 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEBB, ROSS, A., MR.,**

Mailing Address 6312 N LE MAI AVE.

City  
CHICAGOState  
ILZip Code  
60646-4828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.20

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691673**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WELCH, GARY, , ,**

Mailing Address 3349 AN COUNTY RD 463

City  
MONTALBAState  
TXZip Code  
75853-2933FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.60

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27693141**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELCH, GARY, , ,**

Mailing Address 3349 AN COUNTY RD 463

City  
MONTALBAState  
TXZip Code  
75853-2933FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

331.60

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27693143**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.62



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3309 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELCH, GARY, , ,**

Mailing Address 3349 AN COUNTY RD 463

City  
MONTALBAState  
TXZip Code  
75853-2933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27693145**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WELLS, KESSA, , ,**

Mailing Address 686 LISMORE LANE

City  
NAPLESState  
FLZip Code  
34108-8562FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692681**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELSH, THERESA, , ,**

Mailing Address 2015 OLD BALSAM RD

City  
WAYNESVILLEState  
NCZip Code  
28786-8036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691041**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3310 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEST, THERESA, , ,**

Mailing Address 148 MAPLE CV

City  
ONALASKAState  
TXZip Code  
77360-7016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691875**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690959**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHEELER, BRUCE, , ,**

Mailing Address 7800 SOUTHWEST PARKWAY

City  
AUSTINState  
TXZip Code  
78735-6113FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

349.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690184**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

137.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3311 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHEELER, BRUCE, , ,**

Mailing Address 7800 SOUTHWEST PARKWAY

City  
AUSTINState  
TXZip Code  
78735-6113FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690186

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHEELER, BRUCE, , ,**

Mailing Address 7800 SOUTHWEST PARKWAY

City  
AUSTINState  
TXZip Code  
78735-6113FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692415

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHEELER, EILEEN, , ,**

Mailing Address IN176 PAPWORTH

City  
CAROL STREAMState  
ILZip Code  
60188-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

342.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691259

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

64.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3312 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITE, PATRICIA, J., ,**

Mailing Address 23295 HARBOR LIGHT CIRCLE

City  
ABINGDONState  
VAZip Code  
24211-5515FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691226**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITEMORE, BEBE, , ,**

Mailing Address 4785 MURFREESBORO ROAD

City  
ARRINGTONState  
TNZip Code  
37014-9171FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691407**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITTAKER, JERRY, , ,**

Mailing Address 45 CRABLINE COURT

City  
HILTON HEADState  
SCZip Code  
29928-3539FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.59

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691205**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

173.75

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3313 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, BETTY, , ,**

Mailing Address 311 HARPER LOOP

City  
GRANTS PASS

State  
OR

Zip Code  
97527-5339

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.52

Date of Receipt

**02** / **15** / **2025**

**Transaction ID : SA11A.27691962**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, BETTY, , ,**

Mailing Address 311 HARPER LOOP

City  
GRANTS PASS

State  
OR

Zip Code  
97527-5339

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.52

Date of Receipt

**02** / **15** / **2025**

**Transaction ID : SA11A.27692001**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMSON, GARY, , ,**

Mailing Address 817 WEST FRONT STREET

City  
SEALY

State  
TX

Zip Code  
77474-3422

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

417.50

Date of Receipt

**02** / **15** / **2025**

**Transaction ID : SA11A.27692550**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

55.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3314 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMSON, NANCY, , ,**

Mailing Address 19024 HORNSBY LANE

City  
SPICEWOODState  
TXZip Code  
78669-6955FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691628**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, BRAD, , ,**

Mailing Address 13 HICKORY KNOLL PLACE

City  
HILTON HEAD ISLANDState  
SCZip Code  
29926-2656FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CHARTER ONE REALTYOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.57

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690215**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, JEAN, , ,**

Mailing Address 5644 ARAL DRIVE

City  
LAKELANDState  
FLZip Code  
33805-9615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692952**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3315 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, MICHAEL, , ,**

Mailing Address 126 BRIARWOOD DR.

City  
WINCHESTERState  
VAZip Code  
22603-4403FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SKYEPOINT DECISIONSOccupation (for Individual)  
IT CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27690395**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINTERS, KENNETH, C., MR.,**

Mailing Address 29840 THUNDERPAW DR

City  
HARVESTState  
ALZip Code  
35749-6523FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27692797**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOLFF, PAMELA, , ,**

Mailing Address 2709 SE EAGLE DR.

City  
PORT SAINT LUCIEState  
FLZip Code  
34984-8916FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025**Transaction ID : SA11A.27691208**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3316 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WORSDELL, TERRY, , ,**

Mailing Address 1840 PARK NEWPORT DRIVE, #201

City  
NEWPORT BEACHState  
CAZip Code  
92660-5054FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691137

Amount of Each Receipt this Period

44.18

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691079

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691345

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.63



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3317 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692133

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WYNNE, JOHN, , ,**

Mailing Address 1896 EAST WINTERGREEN DRIVE

City  
GREEN VALLEYState  
AZZip Code  
85614-6296FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692279

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27690577

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3318 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691862

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691978

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692592

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

195.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3319 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNG, GAIL, , ,**

Mailing Address 3572 N WAREINGWOOD DRIVE

City  
MONTGOMERYState  
ALZip Code  
36109-2828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.58

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27691368**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNGBLOOD, MICHAEL, RALPH, ,**

Mailing Address 40499 EMERALD LN W

City  
CLINTON TOWNSHIPState  
MIZip Code  
48038-4753FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PLASTIC SERVICE CENTERS INCOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.30

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692794**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YU, SEBASTIAN, , ,**

Mailing Address 1500 HUDSON ST. APT 9S

City  
HOBOKENState  
NJZip Code  
07030-6748FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KAOHSIUNG MEDICAL UNIVERSITYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

591.36

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2025**Transaction ID : SA11A.27692619**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.03

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3320 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YU, SEBASTIAN, , ,

Mailing Address 1500 HUDSON ST. APT 9S

City  
HOBOKENState  
NJZip Code  
07030-6748FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KAOHSIUNG MEDICAL UNIVERSITYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692621

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YU, SEBASTIAN, , ,

Mailing Address 1500 HUDSON ST. APT 9S

City  
HOBOKENState  
NJZip Code  
07030-6748FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KAOHSIUNG MEDICAL UNIVERSITYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692622

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YU, SEBASTIAN, , ,

Mailing Address 1500 HUDSON ST. APT 9S

City  
HOBOKENState  
NJZip Code  
07030-6748FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KAOHSIUNG MEDICAL UNIVERSITYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

591.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692626

Amount of Each Receipt this Period

83.28

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 3321 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YU, SEBASTIAN, , ,**

Mailing Address 1500 HUDSON ST. APT 9S

City  
HOBOKENState  
NJZip Code  
07030-6748FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KAOHSIUNG MEDICAL UNIVERSITYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692628

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YU, SEBASTIAN, , ,**

Mailing Address 1500 HUDSON ST. APT 9S

City  
HOBOKENState  
NJZip Code  
07030-6748FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KAOHSIUNG MEDICAL UNIVERSITYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692631

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YU, SEBASTIAN, , ,**

Mailing Address 1500 HUDSON ST. APT 9S

City  
HOBOKENState  
NJZip Code  
07030-6748FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KAOHSIUNG MEDICAL UNIVERSITYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

591.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692633

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

143.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3322 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YU, SEBASTIAN, , ,

Mailing Address 1500 HUDSON ST. APT 9S

City  
HOBOKENState  
NJZip Code  
07030-6748FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KAOHSIUNG MEDICAL UNIVERSITYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692635

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YU, SEBASTIAN, , ,

Mailing Address 1500 HUDSON ST. APT 9S

City  
HOBOKENState  
NJZip Code  
07030-6748FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KAOHSIUNG MEDICAL UNIVERSITYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692639

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZACCHIO, WENDY, , ,

Mailing Address 115 SHADY RETREAT TRL

City  
SIX MILEState  
SCZip Code  
29682-3540FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AIHOccupation (for Individual)  
IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27692186

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

231.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3323 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZAPERACH, TERRY, , ,**

Mailing Address 746 LANTANA ST.

City  
COCOAState  
FLZip Code  
32926-5246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691902

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZEHNER, CAROLYN, A., MRS.,**

Mailing Address 1384 TERRACE WAY

City

LAGUNA BEACH

State

CA

Zip Code

92651-2837

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PACIFIC COLLEGEOccupation (for Individual)  
R.N. INSTRUCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27693162

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZELLER, EDWARD, , ,**

Mailing Address 10050 WILDFIELD LN

City

LITTLETON

State

CO

Zip Code

80125-1729

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2025

Transaction ID : SA11A.27691183

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

211.20



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3324 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11C.27693278

Amount of Each Receipt this Period

63311.70

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693724

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693726

Amount of Each Receipt this Period

22.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

24.90

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3325 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693728**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693729**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693730**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

29.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3326 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693732**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693736**

Amount of Each Receipt this Period

22.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAIR, STEFAN, , DR.,**

Mailing Address 8591 SKYLINE DR.

City  
LOS ANGELESState  
CAZip Code  
90046-1042FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694862**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

43.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3327 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693756

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADDEO, WILLIAM, , ,**

Mailing Address 1296 CR 549

City  
HANCEVILLEState  
ALZip Code  
35077-6747FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694467

Amount of Each Receipt this Period

94.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADKINS, MARY, , ,**

Mailing Address 416 SW 725TH RD

City  
CHILHOWEEState  
MOZip Code  
64733-9229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

796.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694421

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

134.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3328 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALEXANDER, ROBERT, , ,**

Mailing Address 1001 EAST WHEEL ROAD

City  
BEL AIRState  
MDZip Code  
21015-6342FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.50

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693895**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALIOTA, PAULETTE, , ,**

Mailing Address 538 MARGO COURT

City  
ERIEState  
PAZip Code  
16505-2112FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.50

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694732**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALKIRE, MAUNIE LOU, , ,**

Mailing Address 6 SUMMIT DRIVE

City  
KIMBERLING CITYState  
MOZip Code  
65686-9418FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

341.94

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695405**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3329 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLEN, MARC, KEVIN, DR.,**

Mailing Address 485 CLUB DR.

City  
AURORAState  
OHZip Code  
44202-8564FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.08

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694945**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALRED, SHERRY, , ,**

Mailing Address 165 SCENIC VALLEY RD

City  
KERRVILLEState  
TXZip Code  
78028-7924FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.66

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694962**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.54

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694002**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3330 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.54

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694014**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.54

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694020**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, SHARON, E., MRS.,**

Mailing Address 12 LIBERTY ST

City  
BEVERLYState  
MAZip Code  
01915-3728FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MASS GENERAL HOSPITALOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.08

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695225**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3331 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARBOGAST, STEVE, , ,**

Mailing Address 175 SEA DUNES DR.

City  
MELBOURNE BEACHState  
FLZip Code  
32951-3313FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694882**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ASHWORTH, DEAN, , ,**

Mailing Address 12625 N. 18TH PL.

City  
PHOENIXState  
AZZip Code  
85022-5737FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693691**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AVELINO, MARCIAL, , ,**

Mailing Address 728 CHATSWORTH DRIVE

City  
ACCOKEEKState  
MDZip Code  
20607-2003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

283.69

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693393**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

186.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3332 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BACHELDOR, NED, , ,**Mailing Address 630 CAROLINA BAY DR  
APT 209City  
WILMINGTONState  
NCZip Code  
28403-2038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.45

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694030**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BANCROFT, HUGH, , MR., III**

Mailing Address P.O. BOX 25

City

RANCHO SANTA FE

State

CA

Zip Code

92067-0025

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1026.20

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694912**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARANEK, DARLENE, , ,**

Mailing Address 197 EAST FAIRLAWN BLVD

City

AKRON

State

OH

Zip Code

44313-4436

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694001**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

320.16



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3333 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARR, CHARLES, , MR.,**

Mailing Address P.O. BOX 98

City  
NACHESState  
WAZip Code  
98937-0098FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRIUMPH AEROSPACEOccupation (for Individual)  
CNC LEAD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693679**

Amount of Each Receipt this Period

158.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEAUDOIN, ROBERT, P., MR.,**

Mailing Address 2673 TORREY PINES DR

City  
BRENTWOODState  
CAZip Code  
94513-7089FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694548**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEAUDOIN, ROBERT, P., MR.,**

Mailing Address 2673 TORREY PINES DR

City  
BRENTWOODState  
CAZip Code  
94513-7089FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695072**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3334 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BENSON, ELIZABETH, , ,**Mailing Address 200 N OCEAN BLVD  
9NCity  
DELRAY BEACHState  
FLZip Code  
33483-7178FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693309**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BENSON, ELIZABETH, , ,**Mailing Address 200 N OCEAN BLVD  
9NCity  
DELRAY BEACHState  
FLZip Code  
33483-7178FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693313**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERLIN, STEVEN, , ,**

Mailing Address 12407 DOVER RD

City  
REISTERSTOWNState  
MDZip Code  
21136-5607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

452.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694631**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3335 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693584

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693609

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694267

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

164.29

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3336 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693293**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BIDWELL, J., TRUMAN, MR., JR.**Mailing Address 2 SUTTON PLACE S  
APT 17ACity  
NEW YORKState  
NYZip Code  
10022-3799FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SULLIVAN & WORCESTER LLPOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694624**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BIDWELL, J., TRUMAN, MR., JR.**Mailing Address 2 SUTTON PLACE S  
APT 17ACity  
NEW YORKState  
NYZip Code  
10022-3799FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SULLIVAN & WORCESTER LLPOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694627**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3337 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLAKELEY, ROBERT, , ,**

Mailing Address 5133 HILLCREST DR.

City  
ZACHARYState  
LAZip Code  
70791-3203FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.60

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694904**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLANTON, JENNIFER, , ,**

Mailing Address 1989 NESMITH ROAD

City  
NESMITHState  
SCZip Code  
29580-3336FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SANTEE COOPEROccupation (for Individual)  
SR. INVENTORY SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.98

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693968**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOGOMOLOV, MERIAM, , ,**

Mailing Address 7434 CARRIAGE PASS

City  
SAN ANTONIOState  
TXZip Code  
78249-2543FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LOGISTICS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694940**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3338 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOWSER, ANDREW, , ,**

Mailing Address 1304 COUNTRY MEADOWS DR.

City  
BEDFORDState  
TXZip Code  
76021-3457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TEAM GROUPOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693866**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMASState  
ORZip Code  
97015-8629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694598**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYDA, KENNETH, , ,**

Mailing Address 1200 BARTON CREEK BLVD, #58

City  
AUSTINState  
TXZip Code  
78735-1633FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

387.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694287**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

106.44

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3339 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYDA, KENNETH, , ,**

Mailing Address 1200 BARTON CREEK BLVD, #58

City  
AUSTINState  
TXZip Code  
78735-1633FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.73

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694424**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRACKEN, KAY, , ,**

Mailing Address 405 HAMVASY

City  
TYLERState  
TXZip Code  
75701-5324FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRACKEN INTERESTOccupation (for Individual)  
OIL AND GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2334.17

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694952**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRADSHAW, JEANIE, , ,**

Mailing Address 251 SMOKERISE TRACE

City  
PEACHTREE CITYState  
GAZip Code  
30269-1301FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

276.86

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693476**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

143.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3340 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRENNER, DOUGLAS, , ,**

Mailing Address 6360 BUTTERNUT DR.

City  
WEST OLIVEState  
MIZip Code  
49460-9153FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.29

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695286**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRICKER, DONALD, , ,**

Mailing Address 1532 CR 222

City  
DURANGOState  
COZip Code  
81303-8101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

745.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694453**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRNAK, JIM, , ,**

Mailing Address 110 WEST MORGAN AVENUE

City  
KEENESBURGState  
COZip Code  
80643-9042FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694612**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.08



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3341 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROADHEAD, ANN, B., ,**

Mailing Address PO BOX 2348

City  
KILL DEVIL HILLSState  
NCZip Code  
27948-2348FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.60

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693281**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROCK, KENNETH, , ,**

Mailing Address 408 N 9TH STREET

City  
NEW BADENState  
ILZip Code  
62265-1137FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.50

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694645**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROOKS, TERESA, , ,**

Mailing Address 415 ACACIA AVE

City  
CORONA DEL MARState  
CAZip Code  
92625-1904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RUBBERITE CORPOccupation (for Individual)  
ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694895**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

198.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3342 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROOKS, THOMAS, , ,**

Mailing Address 1528 HAZELNUT DR.

City  
HARKER HEIGHTSState  
TXZip Code  
76548-2735FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
US ARMYOccupation (for Individual)  
NURSE PRACTITIONER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694427**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROPHY, JAMES, , ,**

Mailing Address 929 WEST KALER DRIVE

City  
PHOENIXState  
AZZip Code  
85021-8028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RYLEY CARLOCKOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693803**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693623**

Amount of Each Receipt this Period

0.19

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

204.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3343 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, JENISE, , ,**

Mailing Address 10370 SW WESTLAWN BLVD

City  
PORT SAINT LUCIEState  
FLZip Code  
34987-2463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

**Transaction ID : SA11A.27695143**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

**Transaction ID : SA11A.27693955**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

**Transaction ID : SA11A.27694185**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

109.96

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3344 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694229

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694241

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, SHARMAN, , MS.,**

Mailing Address 110 CLIFF ST

City  
CORDOVAState  
ALZip Code  
35550-1216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2819.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693279

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

202.53

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3345 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BROWN, SHARMAN, , MS.,

Mailing Address 110 CLIFF ST

City  
CORDOVAState  
ALZip Code  
35550-1216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2819.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693283

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BROWN, SHARMAN, , MS.,

Mailing Address 110 CLIFF ST

City  
CORDOVAState  
ALZip Code  
35550-1216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2819.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693284

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BROWN, SHARMAN, , MS.,

Mailing Address 110 CLIFF ST

City  
CORDOVAState  
ALZip Code  
35550-1216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2819.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693287

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

312.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3346 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRUMAN, BERNARD, , ,**

Mailing Address PO BOX762

City  
CHILOQUINState  
ORZip Code  
97624-0762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694746

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRUMAN, BERNARD, , ,**

Mailing Address PO BOX762

City  
CHILOQUINState  
ORZip Code  
97624-0762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694755

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUCHIGNANI, ELIZABETH, , ,**

Mailing Address 4058 WAYNOKA AVE.

City  
MEMPHISState  
TNZip Code  
38117-2234FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694794

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

213.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3347 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUNN, KAY, , ,**

Mailing Address 1908 GAINESWOOD DR

City  
TUSCALOOSAState  
ALZip Code  
35406-3558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.15

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693784**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURR, LAWRENCE, , MR.,**

Mailing Address 31065 CASTLE RIDGE DRIVE

City  
BROOKSVILLEState  
FLZip Code  
34602-7529FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.90

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694487**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUSTARD, ANN, , ,**

Mailing Address 4512 GREENVIEW RD.

City  
TRENT WOODSState  
NCZip Code  
28562-7634FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.24

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693461**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

49.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3348 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUTZER, DONNA, , ,**

Mailing Address 943 WELKIN COURT

City  
CONWAYState  
SCZip Code  
29526-9275FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.40

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693709**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CADICAMO, EVELYN, M., MRS.,**

Mailing Address 43577 SERENITY DR

City  
NORTHVILLEState  
MIZip Code  
48167-8932FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.71

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694785**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CALLAHAN, DOROTHY, , ,**

Mailing Address 6704 LAKE INVERNESS CT

City  
ROGERSState  
ARZip Code  
72758-8975FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

253.03

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693697**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

134.92



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3349 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARBO, LINDA, , ,**

Mailing Address 23 SHIRRA AVENUE

City  
STATEN ISLANDState  
NYZip Code  
10314-4986FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693555**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695325**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695349**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

41.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3350 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARPENTER, SANDRA, , ,

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27695352

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARR, HARLEY, , MR.,

Mailing Address 17011 CEDAR PLZ APT 6C

City  
OMAHAState  
NEZip Code  
68130-2379FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27695249

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARROLL, SHIRLEY, , ,

Mailing Address 1509 MOSSWOOD LANE

City  
WOODSTOCKState  
GAZip Code  
30189-6811FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
METRO RESAOccupation (for Individual)  
SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694171

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

80.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3351 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARTWRIGHT, JIM, , ,**

Mailing Address 12012 LORNA ST.

City  
GARDEN GROVEState  
CAZip Code  
92841-3234FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.97

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693687**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAST, BONNIE, , ,**

Mailing Address 308 PINE MOSS DR.

City  
FORT WALTON BEACHState  
FLZip Code  
32548-6308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.04

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693453**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAMBERLIN, CLINT, , ,**

Mailing Address 1519 5TH AVENUE WEST

City  
WILLISTONState  
NDZip Code  
58801-3903FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

427.98

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694451**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3352 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANA, MAGHAR, S., MR.,**

Mailing Address 315 MERCEDES LANE

City  
COLBURNState  
INZip Code  
47905-4566FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.51

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695151**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANA, MAGHAR, S., MR.,**

Mailing Address 315 MERCEDES LANE

City  
COLBURNState  
INZip Code  
47905-4566FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.51

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695216**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695164**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.82

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3353 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHAPMAN, LAURIE, , ,**

Mailing Address 2905 CLIFF PT

City  
SPICEWOOD

State  
TX

Zip Code  
78669-3252

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27693882**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHRISTIE, JOHN, , ,**

Mailing Address 1575 HERITAGE DR, STE 107

City  
MCKINNEY

State  
TX

Zip Code  
75069-3395

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

698.65

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27694954**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CIMINO, SHIRLEY, R., MS.,**

Mailing Address 44600 MONTEREY AVE. APT. A219

City  
PALM DESERT

State  
CA

Zip Code  
92260-3368

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.24

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27693935**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

354.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3354 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693398**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693465**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLARONI, DANIELLE, , ,**

Mailing Address 17 WITHERELL DRIVE

City  
GREENWICHState  
CTZip Code  
06831-4417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694591**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

137.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3355 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COCHRAN, JOHN, , ,**

Mailing Address 20 MIDDLE RD

City  
PALM BEACHState  
FLZip Code  
33480-4712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695228**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COHEN, ALBERT, , ,**

Mailing Address 960 SEASAGE DR.

City  
DELRAY BEACHState  
FLZip Code  
33483-6628FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DELRAY HOSPITALOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1395.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695064**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLUCCI, MARYLOU, , ,**

Mailing Address 127 BAYVIEW LN

City  
STATEN ISLANDState  
NYZip Code  
10309-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

344.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694327**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

635.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3356 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLUCCI, MARYLOU, , ,**

Mailing Address 127 BAYVIEW LN

City  
STATEN ISLAND

State  
NY

Zip Code  
10309-3638

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.45

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27695398**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONNOLLY, SUSAN, , ,**

Mailing Address 27217 WATERFALL HILL PARKWAY

City  
SPICEWOOD

State  
TX

Zip Code  
78669-3079

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693930**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONVERY, LEO, P., MR.,**

Mailing Address P.O. BOX 1318

City  
EDGARTOWN

State  
MA

Zip Code  
02539-1318

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27694404**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

188.60



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3357 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORNELIUSON, KAYE, , ,**

Mailing Address 5456 N WOODSON AVENUE

City  
FRESNOState  
CAZip Code  
93711-2548FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PHILIP P CORNELIUSONOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2025

**Transaction ID : SA11A.27694458**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COULTER, DON, A., ,**

Mailing Address 2122 OLD FOUNDRY RD

City  
WEATHERFORDState  
TXZip Code  
76087-2107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2025

**Transaction ID : SA11A.27694543**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIGO, JACQUELINE, L., MS.,**

Mailing Address 1049 SUMMIT DR

City  
MOUNT VERNONState  
OHZip Code  
43050-9576FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1371.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2025

**Transaction ID : SA11A.27695035**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

183.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3358 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CREBO, DOTTIE, , ,**

Mailing Address 9254 W 600 N

City  
SHARPSVILLEState  
INZip Code  
46068-9355FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695127**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRESS, WILLIAM, E., MR.,**Mailing Address 1304 REDBUD ST  
APT 202City  
YUKONState  
OKZip Code  
73099-5656FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.91

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693417**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CUNNINGHAM, RONALD, , MR.,**

Mailing Address 4368 E 58TH ST

City  
TULSAState  
OKZip Code  
74135-4200FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AMERICAN ELECTRIC POWEROccupation (for Individual)  
IT ENTERPRISE ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

462.21

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693487**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

191.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3359 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DALE, JOHN, , ,**

Mailing Address 20 CHATHAM RD

City  
HEWITTState  
NJZip Code  
07421-1604FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RIVERVIEW PAVINGOccupation (for Individual)  
LABORER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695080**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEGROODT, RALPH, , ,**

Mailing Address 31661 WELL BOTTOM RD

City  
GALENAState  
MDZip Code  
21635-1334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694511**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DELISLE, CYNTHIA, , ,**

Mailing Address 5850 NW 165TH ST

City  
TRENTONState  
FLZip Code  
32693-7844FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

479.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695078**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3360 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DELUCA, TONI, L., MS.,**

Mailing Address 4684 E HEDGES AVE

City  
FRESNOState  
CAZip Code  
93703-4707FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SJC INCOccupation (for Individual)  
COMPTROLLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.65

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694393**

Amount of Each Receipt this Period

46.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DENHOFF, DIANE, K., ,**

Mailing Address 1908 STATE ROUTE 19

City  
WELLSVILLEState  
NYZip Code  
14895-9740FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.26

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693339**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEVERS, RONALD, , ,**

Mailing Address 2965 CHERRY BLOSSOM LOOP

City  
SAINT CLOUDState  
FLZip Code  
34771-9339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.12

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694262**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3361 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIPASQUALE, KRISTOFFER, , ,**

Mailing Address 37 WOODROW STREET

City  
HUDSONState  
MAZip Code  
01749-2811FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.82

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694102**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOW, GREG, , ,**

Mailing Address P.O. BOX 1040

City  
RICHLANDState  
WAZip Code  
99352-1040FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695006**

Amount of Each Receipt this Period

76.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DRONE, DARLENE, , ,**

Mailing Address 11700 SOUTHWIND RD

City  
RIDGWAYState  
ILZip Code  
62979-2424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

712.96

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693603**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

127.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3362 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUFFY, GERARD, , ,**

Mailing Address 39 BAYBERRY LN

City  
MIDDLETOWNState  
NJZip Code  
07748-1424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693878**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUFFY, GERARD, , ,**

Mailing Address 39 BAYBERRY LN

City  
MIDDLETOWNState  
NJZip Code  
07748-1424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695126**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNCAN, ALBERT, , ,**

Mailing Address 3318 DAWN DR

City  
MIDLANDState  
MIZip Code  
48642-4091FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694024**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3363 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUTCHER, MICHAEL, A., MR.,**

Mailing Address 6628 TANGLEWOOD RD

City  
SAN DIEGOState  
CAZip Code  
92111-4146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.31

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693447**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EADES, LINDA, , ,**

Mailing Address 14250 STATE ROUTE JJ

City  
WEST PLAINSState  
MOZip Code  
65775-5834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.55

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694431**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EARL, CONSTANCE, M., MS.,**

Mailing Address 571 GREEN T LK W

City  
HERNANDOState  
MSZip Code  
38632-4511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.68

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693620**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

104.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3364 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EASTMAN, STEVEN, , ,**

Mailing Address 6848 N GOVERNMENT WAY 114

City  
DALTON GARDENSState  
IDZip Code  
83815-7799FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693888

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EASTMAN, STEVEN, , ,**

Mailing Address 6848 N GOVERNMENT WAY 114

City  
DALTON GARDENSState  
IDZip Code  
83815-7799FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694221

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EASTMAN, STEVEN, , ,**

Mailing Address 6848 N GOVERNMENT WAY 114

City  
DALTON GARDENSState  
IDZip Code  
83815-7799FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694239

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.85



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3365 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ECHOLS, DON, , ,**

Mailing Address 3461 JERROLD BLVD

City  
BRUNSWICKState  
OHZip Code  
44212-2225FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.30

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694784**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELLESTAD, BOYD, ALLEN, MR.,**

Mailing Address 30508 SANTA LUNA DR.

City  
RANCHO PALOS VERDEState  
CAZip Code  
90275-6318FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.12

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694525**

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENGLISH, SHERRY, , ,**

Mailing Address 15815 BOOTH CIR

City  
VOLENTEState  
TXZip Code  
78641-6018FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

579.30

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693443**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

132.11

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3366 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FASSNACHT, MARILYN, , ,**

Mailing Address 119 COFFEE MILL CREEK ROAD

City  
GEORGETOWN

State  
TX

Zip Code  
78633-6015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.88

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27694433**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOM

State  
CA

Zip Code  
95630-6172

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27693396**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FUTCH, JOAN, , ,**

Mailing Address 1206 VOYLE ST.

City  
LUFKIN

State  
TX

Zip Code  
75901-1416

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.06

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27693883**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

93.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3367 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLAGHER, MARY, , MRS.,**

Mailing Address 647 CHEVY CHASE CIR

City  
SUGAR LANDState  
TXZip Code  
77478-3601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694619**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GATES, ALTON, , ,**

Mailing Address 9 MUSKOGEE LANE

City  
DESTINState  
FLZip Code  
32541-4432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GATES WINERYOccupation (for Individual)  
WINE MAKER, PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693342**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695058**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3368 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695059**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695061**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695063**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.37

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3369 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GEHRING, CARL, , ,**

Mailing Address **754 PLEASANT HILL ROAD**

City  
**NOLANVILLE**

State  
**TX**

Zip Code  
**76559-4512**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**365.55**

Date of Receipt

**02 / 16 / 2025**

**Transaction ID : SA11A.27695066**

Amount of Each Receipt this Period

**4.95**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GEHRING, CARL, , ,**

Mailing Address **754 PLEASANT HILL ROAD**

City  
**NOLANVILLE**

State  
**TX**

Zip Code  
**76559-4512**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**365.55**

Date of Receipt

**02 / 16 / 2025**

**Transaction ID : SA11A.27695067**

Amount of Each Receipt this Period

**5.21**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEHRING, CARL, , ,**

Mailing Address **754 PLEASANT HILL ROAD**

City  
**NOLANVILLE**

State  
**TX**

Zip Code  
**76559-4512**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**365.55**

Date of Receipt

**02 / 16 / 2025**

**Transaction ID : SA11A.27695073**

Amount of Each Receipt this Period

**5.21**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**15.37**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3370 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GERSEK, BARBARA, , ,**

Mailing Address 2153 ONTARIO ROAD

City  
GREEN BAYState  
WIZip Code  
54311-5016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.28

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693964**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILCHREST, RICHARD, , MR.,**

Mailing Address 1040 MULBERRY PL.

City  
TOMS RIVERState  
NJZip Code  
08753-5235FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693527**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIRVIN, JOANN, , MRS.,**

Mailing Address 7110 CREEKSIDE DR.

City  
LANSINGState  
MIZip Code  
48917-9618FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

775.55

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694238**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3371 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSA

State  
OK

Zip Code  
74137-5408

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

**02** / **16** / **2025**

**Transaction ID : SA11A.27694033**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADE

State  
FL

Zip Code  
33841-9531

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

**02** / **16** / **2025**

**Transaction ID : SA11A.27694140**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOTTLIEB, STEPHEN, , ,**

Mailing Address 705 CORELLI COVE ST

City  
HENDERSON

State  
NV

Zip Code  
89011-5523

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

346.88

Date of Receipt

**02** / **16** / **2025**

**Transaction ID : SA11A.27693915**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

21.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3372 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2025

**Transaction ID : SA11A.27694198**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2025

**Transaction ID : SA11A.27694208**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2025

**Transaction ID : SA11A.27694210**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3373 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2025

**Transaction ID : SA11A.27694215**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2025

**Transaction ID : SA11A.27694217**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAYBASH, PETER, J., MR., JR.**

Mailing Address 4 CAMBRIDGE DR.

City  
HERSHEYState  
PAZip Code  
17033-2100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2025

**Transaction ID : SA11A.27693479**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

44.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3374 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, LINDA, , ,**

Mailing Address 15657 FM 244

City  
IOLAState  
TXZip Code  
77861-3867FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694456

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, MARJORIE, , ,**

Mailing Address 4312 BAYOU RIDGE DRIVE

City  
PACEState  
FLZip Code  
32571-8647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693325

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, MARJORIE, , ,**

Mailing Address 4312 BAYOU RIDGE DRIVE

City  
PACEState  
FLZip Code  
32571-8647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693327

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

44.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3375 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, MARJORIE, , ,**

Mailing Address 4312 BAYOU RIDGE DRIVE

City  
PACEState  
FLZip Code  
32571-8647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693328

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, MARJORIE, , ,**

Mailing Address 4312 BAYOU RIDGE DRIVE

City  
PACEState  
FLZip Code  
32571-8647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693337

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, MARJORIE, , ,**

Mailing Address 4312 BAYOU RIDGE DRIVE

City  
PACEState  
FLZip Code  
32571-8647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693340

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3376 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, MARJORIE, , ,**

Mailing Address 4312 BAYOU RIDGE DRIVE

City  
PACEState  
FLZip Code  
32571-8647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693356

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, MARJORIE, , ,**

Mailing Address 4312 BAYOU RIDGE DRIVE

City  
PACEState  
FLZip Code  
32571-8647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693357

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, MARJORIE, , ,**

Mailing Address 4312 BAYOU RIDGE DRIVE

City  
PACEState  
FLZip Code  
32571-8647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693358

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

44.76

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3377 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, MARJORIE, , ,**

Mailing Address 4312 BAYOU RIDGE DRIVE

City  
PACEState  
FLZip Code  
32571-8647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693359

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, MARJORIE, , ,**

Mailing Address 4312 BAYOU RIDGE DRIVE

City  
PACEState  
FLZip Code  
32571-8647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693360

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, MARJORIE, , ,**

Mailing Address 4312 BAYOU RIDGE DRIVE

City  
PACEState  
FLZip Code  
32571-8647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693362

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.67

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3378 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTS

State  
NY

Zip Code  
10598-2323

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.48

Date of Receipt

**02** / **16** / **2025**

**Transaction ID : SA11A.27694242**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTS

State  
NY

Zip Code  
10598-2323

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.48

Date of Receipt

**02** / **16** / **2025**

**Transaction ID : SA11A.27694329**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREMBI, JAMES, , MR.,**

Mailing Address 82 PUTTER DRIVE

City  
PALM COAST

State  
FL

Zip Code  
32164-4700

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.97

Date of Receipt

**02** / **16** / **2025**

**Transaction ID : SA11A.27693481**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

13.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3379 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694410**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694656**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.52

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694659**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3380 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARD

State  
OH

Zip Code  
43026-3125

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27694663**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARD

State  
OH

Zip Code  
43026-3125

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27694762**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARD

State  
OH

Zip Code  
43026-3125

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.52

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27694768**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

38.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3381 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694770

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694771

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694774

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3382 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUM, GAYLE, , MS.,**

Mailing Address 509 VISTA CV

City  
VICTORIAState  
TXZip Code  
77904-1310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRADY BEARINGOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.18

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694278**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HACKL, MARK, , ,**

Mailing Address 485 HICKORY NUT AVE

City  
OLDSMARState  
FLZip Code  
34677-2016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.15

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694411**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HADDEN, MAYO, , MR.,**Mailing Address 4701 TURNBERRY LN  
UNIT 9BCity  
COLUMBUSState  
GAZip Code  
31909-8070FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.28

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693611**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3383 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HALLING, DEBRA, , ,**

Mailing Address 408 COUNTY ROAD 218

City  
SCHULENBURGState  
TXZip Code  
78956-6018FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694523

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRISON, PATRICIA, , ,**Mailing Address 707 NORTH SHEPHERD DRIVE  
SUITE 700City  
HOUSTONState  
TXZip Code  
77007-1351FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694160

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRISON, PATRICIA, , ,**Mailing Address 707 NORTH SHEPHERD DRIVE  
SUITE 700City  
HOUSTONState  
TXZip Code  
77007-1351FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

491.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694163

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

235.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3384 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRIS, ROD, , ,**

Mailing Address 15515 SE RIVERSHORE DR.

City  
VANCOUVERState  
WAZip Code  
98683-5380FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

669.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694214**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARVEY, ALAN, , ,**

Mailing Address 626 KESSLER LAKE

City  
DALLASState  
TXZip Code  
75208-3938FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693666**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEATHMAN, CHRISTINE, , ,**

Mailing Address 1119 SOUTH SAGE CREEK COURT

City  
HEBER CITYState  
UTZip Code  
84032-4169FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLYMED PLUSOccupation (for Individual)  
FORMULATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1144.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693993**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

532.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3385 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695137**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEFFERS, REGINA, , ,**

Mailing Address 120 14TH AVE

City  
SEA CLIFFState  
NYZip Code  
11579-1221FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1876.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693843**

Amount of Each Receipt this Period

918.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENDERSON, MARGARET, , ,**

Mailing Address 10333 ARVIN HILL RD

City  
AUBREYState  
TXZip Code  
76227-6848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

337.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694532**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

956.42

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3386 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIGGINS, MARSHA, , ,**

Mailing Address P.O. BOX 48

City  
VERBANK

State  
NY

Zip Code  
12585-0048

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.67

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27694023**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWN

State  
NJ

Zip Code  
08057-2931

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENT

Occupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27694868**

Amount of Each Receipt this Period

2.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANE

State  
UT

Zip Code  
84737-4408

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.79

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693300**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

53.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3387 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.79

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693301**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.79

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693302**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.79

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693303**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

18.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3388 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILLMAN, PATRICK, , ,**

Mailing Address 34 HUNTERSTOWN ROAD

City  
GERMANTOWNState  
NYZip Code  
12526-5604FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694021

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILLMAN, PATRICK, , ,**

Mailing Address 34 HUNTERSTOWN ROAD

City  
GERMANTOWNState  
NYZip Code  
12526-5604FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694049

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HODGE, LINDA, , MS.,**

Mailing Address 21 PERKINS RD

City  
GREENWICHState  
CTZip Code  
06830-3510FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

468.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694850

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

112.05



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3389 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOISINGTON, JACKIE, , ,**

Mailing Address 2625 W RELATION ST

City  
SAFFORD

State  
AZ

Zip Code  
85546-4047

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOOPNER ENERGY

Occupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.74

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693770**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOISINGTON, JACKIE, , ,**

Mailing Address 2625 W RELATION ST

City  
SAFFORD

State  
AZ

Zip Code  
85546-4047

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOOPNER ENERGY

Occupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.74

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27694978**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLLINGTON, MARGARET, , ,**

Mailing Address 9960 ATRIUM WAY APT 514

City  
JACKSONVILLE

State  
FL

Zip Code  
32225-6447

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.13

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693556**

Amount of Each Receipt this Period

0.19

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

71.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3390 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLUB, LORRAINE, , ,**

Mailing Address 58 DOVE CT

City  
CLOVERDALEState  
VAZip Code  
24077-3050FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693652**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOPKINS, GEORGE, , ,**

Mailing Address 135 CR 2984

City  
HUGHES SPRINGSState  
TXZip Code  
75656-6715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693981**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

334.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694821**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3391 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694822

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694826

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

334.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694827

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

79.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3392 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.95

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694832**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HORVATH, JIM, , ,**

Mailing Address 555 EAST RIVER ROAD

City  
TUCSONState  
AZZip Code  
85704-5843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1190.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693896**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694036**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3393 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUTCHINSON, ROBERT, , MR.,**

Mailing Address 808 CRIMSON RIDGE TRL

City  
FUQUAY VARINAState  
NCZip Code  
27526-2718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695180**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. INABINET, DEBORAH, O., ,**

Mailing Address 4939 VICTORIA AVENUE

City  
NORTH CHARLESTONState  
SCZip Code  
29405-4223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695238**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. INABINET, DEBORAH, O., ,**

Mailing Address 4939 VICTORIA AVENUE

City  
NORTH CHARLESTONState  
SCZip Code  
29405-4223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1481.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695256**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3394 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IREDALE, NANCY, L., MS.,**

Mailing Address P.O. BOX 5084

City  
INCLINE VILLAGEState  
NVZip Code  
89450-5084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693834**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693827**

Amount of Each Receipt this Period

4.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693864**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.15

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3395 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAMES, JERRY, G., MR.,**

Mailing Address 409-42 AVE.

City  
GREELEY

State  
CO

Zip Code  
80634-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
O-I

Occupation (for Individual)  
MOLD TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.62

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27694169**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JANES, JEFFREY, , ,**

Mailing Address 3610 CAPE FOREST DR.

City  
KINGWOOD

State  
TX

Zip Code  
77345-1321

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27694462**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JENNINGS, CHARLES, , ,**

Mailing Address 12323 BUTTERBROOK LANE

City  
FORT WAYNE

State  
IN

Zip Code  
46818-8517

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27694817**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

126.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3396 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEWELL, WILLIAM, , ,**

Mailing Address PO BOX 64446

City  
LUBBOCKState  
TXZip Code  
79464-4446FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NORTHSTAR ANESTHESIAOccupation (for Individual)  
ANESTHESIOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694613

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, KAY, , ,**

Mailing Address 800 NAVAJO AVE

City  
FORT MORGANState  
COZip Code  
80701-4081FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693563

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, SUSAN, J., MS.,**

Mailing Address 3418 E SUNCREST CT

City  
PHOENIXState  
AZZip Code  
85044-3506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRAFFICADEOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

431.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693970

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

183.75



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3397 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, ALFRED, D., MR., JR.**

Mailing Address 616 LYNN AVE

City  
ANTIOCHState  
CAZip Code  
94509-5030FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693384

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694544

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694569

Amount of Each Receipt this Period

34.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.39

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3398 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KENYON, TONI, , ,**

Mailing Address 83 CONCORD RD

City  
BEDFORD

State  
MA

Zip Code  
01730-2036

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

982.80

Date of Receipt

**02** / **16** / **2025**

**Transaction ID : SA11A.27695172**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KERINS, MARY, , ,**

Mailing Address 127 74TH STREET

City  
NIAGARA FALLS

State  
NY

Zip Code  
14304-4032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.32

Date of Receipt

**02** / **16** / **2025**

**Transaction ID : SA11A.27693976**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KERSEY, DALLAS, , ,**

Mailing Address 154 STEEP HILL RD

City  
WESTON

State  
CT

Zip Code  
06883-1959

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

**02** / **16** / **2025**

**Transaction ID : SA11A.27694620**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

239.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3399 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEYES, ALAN, L., ,**

Mailing Address P.O. BOX 4606

City  
SEVIERVILLEState  
TNZip Code  
37864-4606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IAMTVOccupation (for Individual)  
INFORMATION MEDIA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695065**

Amount of Each Receipt this Period

44.18

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIELY, SUSAN, , ,**

Mailing Address 5500 E PEAKVIEW

City  
LITTLETONState  
COZip Code  
80121-3539FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693421**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLEIN, MICHAEL, F., MR.,**

Mailing Address 5220 KLEE MILL RD S

City  
SYKESVILLEState  
MDZip Code  
21784-9257FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHARLES A. KLEIN AND SONSOccupation (for Individual)  
MECHANICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4330.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694406**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

219.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3400 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.01

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694553**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.01

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694554**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.01

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694556**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3401 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2025

**Transaction ID : SA11A.27694557**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2025

**Transaction ID : SA11A.27694558**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2025

**Transaction ID : SA11A.27694563**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3402 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLINE, JUDITH, M., ,**

Mailing Address 2212 COUNTRY VIEW DR.

City  
CHARLESTONState  
ILZip Code  
61920-9392FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694572**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693757**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694055**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3403 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694057**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694059**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694062**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3404 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694072**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KORENEK, LAWRENCE, , ,**

Mailing Address 421FRELS

City  
EL CAMPOState  
TXZip Code  
77437-2063FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BANKEROccupation (for Individual)  
LENDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694248**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KORZNIECKI, LOU, , ,**

Mailing Address P.O. BOX 308

City  
RONKSState  
PAZip Code  
17572-0308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

616.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694578**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3405 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.91

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694911**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LACKAMP, ROBERT, , ,**

Mailing Address 606 N LEONARD RD

City  
SAINT JOSEPHState  
MOZip Code  
64506-4025FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694833**

Amount of Each Receipt this Period

49.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAM, BEN, MINH, MR.,**

Mailing Address 3002 ALBANY CT

City  
WOODBIDGEState  
VAZip Code  
22193-1208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.64

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693785**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

134.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3406 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANDIS, LARRY, , ,**Mailing Address 2460 GLEBE ST  
APT 216City  
CARMELState  
INZip Code  
46032-7156FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694133**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANKFORD, KEITH, , MR.,**

Mailing Address 5309 REVERE ROAD

City  
DURHAMState  
NCZip Code  
27713-2540FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WAKE COUNTYOccupation (for Individual)  
PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693377**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANKFORD, KEITH, , MR.,**

Mailing Address 5309 REVERE ROAD

City  
DURHAMState  
NCZip Code  
27713-2540FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WAKE COUNTYOccupation (for Individual)  
PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693379**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

320.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3407 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANKFORD, KEITH, , MR.,**

Mailing Address 5309 REVERE ROAD

City  
DURHAMState  
NCZip Code  
27713-2540FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WAKE COUNTYOccupation (for Individual)  
PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693381**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANSING, LAINE, , ,**Mailing Address 505 LOMAS SANTA FE DR.  
STE 230City  
SOLANA BEACHState  
CAZip Code  
92075-1340FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LANSING COMPANIESOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1501.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694629**

Amount of Each Receipt this Period

750.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAVELY, NANCY, , ,**

Mailing Address 5336 POINTE DR.

City  
EAST CHINAState  
MIZip Code  
48054-4166FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

359.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693410**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

928.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3408 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAWLER, MICHAEL, , ,**

Mailing Address 724 MCKINLEY ST

City  
STERLINGState  
COZip Code  
80751-2533FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694767**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAYO, LEWIS, DANIEL, MR., SR.**

Mailing Address 2316 W VINE ST

City  
LODIState  
CAZip Code  
95242-3727FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
H&R BLOCK TAX GROUPOccupation (for Individual)  
ENROLLED AGENT/TAX PREPARATI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694353**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEACHMAN, C, WILLIAM, ,**

Mailing Address 1450 EUCLID AVE

City  
BOWLING GREENState  
KYZip Code  
42103-2467FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LEACHMAN MOTORSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1015.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694330**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3409 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEACHMAN, C, WILLIAM, ,**

Mailing Address 1450 EUCLID AVE

City  
BOWLING GREENState  
KYZip Code  
42103-2467FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LEACHMAN MOTORSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1015.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694337**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693946**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEIGHTON, JOAN, , MRS.,**

Mailing Address 44 NEWTON ST

City  
BELMONTState  
MAZip Code  
02478-3751FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JOAN T. LEIGHTON, CPAOccupation (for Individual)  
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

318.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694660**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3410 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEIGHTON, JOAN, , MRS.,**

Mailing Address 44 NEWTON ST

City  
BELMONTState  
MAZip Code  
02478-3751FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOAN T. LEIGHTON, CPAOccupation (for Individual)  
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694665

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEIGHTON, JOAN, , MRS.,**

Mailing Address 44 NEWTON ST

City  
BELMONTState  
MAZip Code  
02478-3751FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOAN T. LEIGHTON, CPAOccupation (for Individual)  
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694672

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27695258

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

85.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3411 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWISSMITH, ROSALIND, , MRS.,**

Mailing Address 503 CYPRESS LINKS WAY

City  
TAYLORS

State  
SC

Zip Code  
29687-6473

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.12

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693637**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITY

State  
IN

Zip Code  
47557-7130

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693638**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITY

State  
IN

Zip Code  
47557-7130

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

967.82

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693581**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

49.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3412 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694138**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694250**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOGSDON, NORMAN , , ,**

Mailing Address 5940 HAVENS TRL

City  
TYLERState  
TXZip Code  
75707-6402FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TIDEWATER MARINEOccupation (for Individual)  
MARINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.58

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693332**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.50



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3413 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOHMAN, CAROLYN, , ,**

Mailing Address 3229 WALNUT CREEK CT

City  
BRYANState  
TXZip Code  
77807-4852FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693722**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOMBROZO, ELIEZER, , ,**

Mailing Address 2555 RUETTE NICE

City  
LA JOLLAState  
CAZip Code  
92037-2011FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693719**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOWRY, DIANE, , ,**

Mailing Address 9 WOODRIDGE RD

City  
MOULTRIEState  
GAZip Code  
31768-5815FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694384**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

137.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3414 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACEYKO, ROBERT, , ,**

Mailing Address 45 HIGHLAND AVE

City  
WALDENState  
NYZip Code  
12586-1429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BERNIES BUS SERVICE INC.Occupation (for Individual)  
SCHOOL BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694372**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MADRIGAL, LINDA, , ,**

Mailing Address 416 SOUTHEAST OLD WEST HIGHWAY

City  
DUNCANState  
AZZip Code  
85534-0600FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694902**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAGUIRE, JOANNE, , MS.,**

Mailing Address 144 E 84TH ST

City  
NEW YORKState  
NYZip Code  
10028-2004FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693813**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.41

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3415 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITY

State  
LA

Zip Code  
71111-2285

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

**02** / **16** / **2025**

**Transaction ID : SA11A.27694184**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITY

State  
LA

Zip Code  
71111-2285

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

**02** / **16** / **2025**

**Transaction ID : SA11A.27694654**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITY

State  
LA

Zip Code  
71111-2285

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

**02** / **16** / **2025**

**Transaction ID : SA11A.27694820**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

206.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3416 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANSOUR, ALFRED, A., DR.,**

Mailing Address 3771 BELLAIRE BLVD

City  
HOUSTONState  
TXZip Code  
77025-1206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ACCESS RADIOLOGYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.19

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694418**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARSHALL, DIANE, , ,**

Mailing Address 64 RUSSELL AVENUE

City  
ORANGEState  
CTZip Code  
06477-2505FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694819**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARSHALL, ROBERT, , ,**

Mailing Address 1886 SPRUCE CREEK BLVD

City  
PORT ORANGEState  
FLZip Code  
32128-6780FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

793.10

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694085**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

198.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3417 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693898**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATEER, RAYMOND, , ,**

Mailing Address 1278 MATEER RD

City  
KITTANNINGState  
PAZip Code  
16201-8024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695323**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATHEWS, TIMOTHY, , ,**

Mailing Address 388 PALOMARES AVENUE

City  
VENTURAState  
CAZip Code  
93003-1737FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

727.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694683**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3418 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATHEWS, TIMOTHY, , ,**

Mailing Address 388 PALOMARES AVENUE

City  
VENTURAState  
CAZip Code  
93003-1737FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2025

**Transaction ID : SA11A.27694687**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCABE, DANIEL, M., MR.,**

Mailing Address 239 WEST TRAIL

City  
STAMFORDState  
CTZip Code  
06903-2407FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2025

**Transaction ID : SA11A.27693594**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCracken, ROBERT, , ,**

Mailing Address 5501 MARSHFIELD CT

City  
ARLINGTONState  
TXZip Code  
76016-2204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

308.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2025

**Transaction ID : SA11A.27695351**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3419 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCELREATH, JAMES, , ,**

Mailing Address 1701SHADYDIDE

City  
EAST LIVERPOOLState  
OHZip Code  
43920-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694219**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCFADDEN, ROYCE, , MR.,**

Mailing Address 1250 FM 168

City  
OLTONState  
TXZip Code  
79064-2118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693304**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCFADDEN, ROYCE, , MR.,**

Mailing Address 1250 FM 168

City  
OLTONState  
TXZip Code  
79064-2118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

267.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693308**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

28.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3420 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCFADDEN, ROYCE, , MR.,**

Mailing Address 1250 FM 168

City  
OLTON

State  
TX

Zip Code  
79064-2118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.29

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693338**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MGINNIS, CHARLES, R., MR.,**

Mailing Address 447 WOODHILL DR

City

OWINGS MILLS

State

MD

Zip Code

21117-1372

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MANAGER OF DEPT OF DEFENSE

Occupation (for Individual)  
ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27694730**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCKENZIE, ED, , ,**

Mailing Address 334 LOS PRADOS DR.

City

SAFETY HARBOR

State

FL

Zip Code

34695-3338

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27694789**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

205.21



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3421 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCKINNEY, JOHN, A., ,**

Mailing Address 2430 E BETHEL DR.

City  
ANAHEIMState  
CAZip Code  
92806-4705FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694149**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCKINNEY, SARA, , ,**

Mailing Address 808 RIVIERA AVE

City  
DAVENPORTState  
FLZip Code  
33897-6850FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694980**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCMAHON, STEWART, , ,**

Mailing Address 25885 LAKE SHORE LANE

City  
MORENO VALLEYState  
CAZip Code  
92551-1651FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MACHINERY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693731**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.21

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3422 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCMULLEN, TIMOTHY, , ,**

Mailing Address 17 BAIER DR.

City  
ROCHESTER

State  
NY

Zip Code  
14606-5311

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

**Transaction ID : SA11A.27693515**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNEIL, COLLIN, , ,**

Mailing Address 1701 HORSESHOE TRAIL

City  
CHESTER SPRINGS

State  
PA

Zip Code  
19425-1814

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

**Transaction ID : SA11A.27695358**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCNULTY, WILLIAM, , ,**

Mailing Address 720 COLONY COURT

City  
NILES

State  
MI

Zip Code  
49120-3048

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.65

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

**Transaction ID : SA11A.27695293**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

149.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3423 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCPHERSON, JEFFREY, , ,**

Mailing Address 111 TAYLOR STREET

City  
GRANBYState  
MAZip Code  
01033-9522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695012**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEEHAN, JOAN, , ,**

Mailing Address 2874 GOLDEN GATE AVE

City  
SAN FRANCISCOState  
CAZip Code  
94118-4111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1962.85

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693711**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEEHAN, JOAN, , ,**

Mailing Address 2874 GOLDEN GATE AVE

City  
SAN FRANCISCOState  
CAZip Code  
94118-4111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1962.85

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694166**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 3424 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MESSERSMITH, CHARLES, , ,**

Mailing Address 604 HATCHWOOD DR.

City  
HAINES CITYState  
FLZip Code  
33844-8208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JEHOVAHOccupation (for Individual)  
PREACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693810**

Amount of Each Receipt this Period

7.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MESSER, JIM, , ,**

Mailing Address 210 HOLMES ROAD

City  
SCARBOROUGHState  
MEZip Code  
04074-8410FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694182**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIDDLETON, JOHN, , ,**

Mailing Address 712 RIDGE RD

City  
HIGHLAND PARKState  
ILZip Code  
60035-3834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

429.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693936**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3425 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, ANNE, , ,**

Mailing Address 6 RONNA RD

City  
GLOUCESTERState  
MAZip Code  
01930-1665FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1006.86

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693537**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, LOUIS, , ,**

Mailing Address 2306 MEADOW VUE DRIVE

City  
MOON TOWNSHIPState  
PAZip Code  
15108-9023FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INNOVATION WORKSOccupation (for Individual)  
EXECUTIVE IN RESIDENCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.05

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695008**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.16

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694071**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.37

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3426 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MILLER, PATRICIA, , ,

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27695121

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, PATRICIA, , ,

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27695209

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MINTZ, MICHAEL, , ,

Mailing Address 19458 WATERS REACH LN

City  
BOCA RATONState  
FLZip Code  
33434-5115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WASTE COST SOLUTIONSOccupation (for Individual)  
GARBAGE CONSULTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694639

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

156.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3427 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MITTELSTAEDT, CRAIG, , ,**

Mailing Address 1199 OLSON AVE

City  
OSHKOSHState  
WIZip Code  
54901-1135FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694804**

Amount of Each Receipt this Period

211.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOLENDORP, DAYTON, , MR.,**

Mailing Address 6507 CASTLE KNOLL COURT

City  
INDIANAPOLISState  
INZip Code  
46250-1439FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694435**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693768**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

281.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3428 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694425**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOODY, JO, ANN, ,**

Mailing Address 507 POWER DR.

City  
DUNCANVILLEState  
TXZip Code  
75116-3721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694576**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORAN, KATHLEEN, , MS.,**

Mailing Address 16 TAMARACK PLACE

City  
GREENWICHState  
CTZip Code  
06831-3631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VOLUNTEEROccupation (for Individual)  
VOLUNTEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695101**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.10



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3429 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORASKI, ROBERT, L., ,**

Mailing Address 1565 LONG CREEK RD

City  
GREENEVILLE

State  
TN

Zip Code  
37743-8259

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

998.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693403**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORASKI, ROBERT, L., ,**

Mailing Address 1565 LONG CREEK RD

City  
GREENEVILLE

State  
TN

Zip Code  
37743-8259

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

998.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27694781**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRICAL, PATRICIA, K., ,**

Mailing Address 5682 COUNTRY LAKES DR

City  
SARASOTA

State  
FL

Zip Code  
34243-3811

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

348.84

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27695185**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

202.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3430 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOUNTEER, FAYE, , ,**

Mailing Address 9985N 5320 W

City  
HIGHLANDState  
UTZip Code  
84003-3501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.12

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694290**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694919**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694924**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.88

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3431 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTON

State  
VA

Zip Code  
22124-2262

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27694927**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTON

State  
VA

Zip Code  
22124-2262

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27694938**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MULHORN, SHIRLEY, , MS.,**

Mailing Address 875 TEMPLE RD.

City  
CLANTON

State  
AL

Zip Code  
35045-8430

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

617.56

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27694845**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

118.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3432 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MULVEHILL, EDWARD, , ,**

Mailing Address 18 INDEPENDENCE CT

City  
PERKASIEState  
PAZip Code  
18944-1637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ADVANCEOccupation (for Individual)  
GM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694721

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MULVEHILL, EDWARD, , ,**

Mailing Address 18 INDEPENDENCE CT

City  
PERKASIEState  
PAZip Code  
18944-1637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ADVANCEOccupation (for Individual)  
GM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694936

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MULVEHILL, EDWARD, , ,**

Mailing Address 18 INDEPENDENCE CT

City  
PERKASIEState  
PAZip Code  
18944-1637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ADVANCEOccupation (for Individual)  
GM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694937

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

18.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3433 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MULVEHILL, EDWARD, , ,**

Mailing Address 18 INDEPENDENCE CT

City  
PERKASIEState  
PAZip Code  
18944-1637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ADVANCEOccupation (for Individual)  
GM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694939

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MULVEHILL, EDWARD, , ,**

Mailing Address 18 INDEPENDENCE CT

City  
PERKASIEState  
PAZip Code  
18944-1637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ADVANCEOccupation (for Individual)  
GM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694942

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MULVEHILL, EDWARD, , ,**

Mailing Address 18 INDEPENDENCE CT

City  
PERKASIEState  
PAZip Code  
18944-1637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ADVANCEOccupation (for Individual)  
GM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694946

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3434 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUNSEY, MELODYE, , ,**

Mailing Address 3535 SO OCEAN DR.

City  
HOLLYWOOD

State  
FL

Zip Code  
33019-2898

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
FAMILY CHRISTIAN WORLD INC .

Occupation (for Individual)  
SR. PASTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.88

Date of Receipt

**02** / **16** / **2025**

**Transaction ID : SA11A.27694004**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MUNSEY, MELODYE, , ,**

Mailing Address 3535 SO OCEAN DR.

City  
HOLLYWOOD

State  
FL

Zip Code  
33019-2898

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
FAMILY CHRISTIAN WORLD INC .

Occupation (for Individual)  
SR. PASTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.88

Date of Receipt

**02** / **16** / **2025**

**Transaction ID : SA11A.27694013**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYN

State  
VA

Zip Code  
23936-9412

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

955.83

Date of Receipt

**02** / **16** / **2025**

**Transaction ID : SA11A.27693610**

Amount of Each Receipt this Period

0.19

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

99.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3435 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEAT, KAREN, , ,**

Mailing Address 2002 APPLESEED DR

City  
ALLENState  
TXZip Code  
75013-4894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693364**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEWELL, LINDA, , ,**

Mailing Address 4324 SUMMER STAR LANE

City  
FORT WORTHState  
TXZip Code  
76244-4934FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694361**

Amount of Each Receipt this Period

1.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NGUYEN, DICHSON, , ,**

Mailing Address 15300 MAGNOLIA ST. SPC.53

City  
WESTMINSTERState  
CAZip Code  
92683-6425FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694519**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3436 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NIELSEN, EARL, , ,**

Mailing Address 10 LIDGERWOOD PLACE

City  
MORRISTOWNState  
NJZip Code  
07960-5736FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MORRISTOWN MEDICAL CENTEROccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694718**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NORTHROP, RICHARD, , ,**

Mailing Address 1135 W 4TH AVE

City  
BROOMFIELDState  
COZip Code  
80020-2055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693771**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

589.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693973**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.50



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3437 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OAK, ALAN, , MR.,**

Mailing Address 5104 BONHAM RD

City  
OXFORDState  
OHZip Code  
45056-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693525**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OAK, ALAN, , MR.,**

Mailing Address 5104 BONHAM RD

City  
OXFORDState  
OHZip Code  
45056-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694842**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ODOM, TAMELA, , ,**

Mailing Address 403 SANFORD ROAD

City  
ANDALUSIAState  
ALZip Code  
36420-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693622**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3438 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ODOM, TAMELA, , ,

Mailing Address 403 SANFORD ROAD

City  
ANDALUSIAState  
ALZip Code  
36420-4121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693642

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLSON, PATRICIA, , ,

Mailing Address 243 OCEANO DRIVE

City  
LOS ANGELESState  
CAZip Code  
90049-4123FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694077

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OSSOFF, ROBERT, , DR.,

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693853

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 3439 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSTERMAN, CINDY, , ,**

Mailing Address 1640 SPRINGHILL RD

City  
AUBREYState  
TXZip Code  
76227-3919FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693739

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAGANINI, KAREN, , MS.,**

Mailing Address 8863 ROBIN LN

City  
KIRTLANDState  
OHZip Code  
44094-9768FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
K&DOccupation (for Individual)  
PROPERTY MANAGEMENT & DEVEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694590

Amount of Each Receipt this Period

60.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAGE, CHERYL, L., MS.,**

Mailing Address 13 PIPESTONE DR.

City  
MIAMISBURGState  
OHZip Code  
45342-6603FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MIAMI VALLEY HOSPITALOccupation (for Individual)  
NURSE/RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27695051

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

199.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3440 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAGE, CHERYL, L., MS.,**

Mailing Address 13 PIPESTONE DR.

City  
MIAMISBURGState  
OHZip Code  
45342-6603FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MIAMI VALLEY HOSPITALOccupation (for Individual)  
NURSE/RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695054**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAGE, CHERYL, L., MS.,**

Mailing Address 13 PIPESTONE DR.

City  
MIAMISBURGState  
OHZip Code  
45342-6603FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MIAMI VALLEY HOSPITALOccupation (for Individual)  
NURSE/RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695235**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PANDOLFO, MICHAEL, , MR.,**

Mailing Address 7900 SUTHERLAND FARM RD

City  
PROSPECTState  
KYZip Code  
40059-9269FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.60

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693294**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3441 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PATTON, JOHN, C., ,**

Mailing Address 4414 TOWN AND COUNTRY DR.

City  
CHARLOTTEState  
NCZip Code  
28226-6311FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694638**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.76

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693758**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.76

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693763**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

84.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3442 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYTON, SUSAN, , ,**

Mailing Address 819 BELLEAU WOOD DRIVE

City  
AKRONState  
OHZip Code  
44303-1714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694878**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PEARSON, CLYDE, , ,**

Mailing Address 1312 FORBES DRIVE

City  
HUNTSVILLEState  
ALZip Code  
35802-1208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694981**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PECORA, SANDRA, J., MRS.,**

Mailing Address 20 EDGEWATER CT

City  
WAKEMANState  
OHZip Code  
44889-9082FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693504**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

385.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3443 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PERRIN, CAROL, , MRS.,**

Mailing Address 16 ROCKY COVE RD

City  
LEXINGTON

State  
SC

Zip Code  
29072-9763

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

921.59

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27693485**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRIN, CAROL, , MRS.,**

Mailing Address 16 ROCKY COVE RD

City  
LEXINGTON

State  
SC

Zip Code  
29072-9763

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

921.59

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27694091**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERRIN, CAROL, , MRS.,**

Mailing Address 16 ROCKY COVE RD

City  
LEXINGTON

State  
SC

Zip Code  
29072-9763

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

921.59

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27695290**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

129.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3444 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETERSON, JUDY, , ,**

Mailing Address 41 JOSIAH BARTLETT RD

City  
AMHERSTState  
NHZip Code  
03031-3050FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694802

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORGState  
VAZip Code  
23860-8229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693501

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORGState  
VAZip Code  
23860-8229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

388.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693848

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

61.44



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3445 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETRITZ, GEORGE, L., ,**

Mailing Address **4811 ROGERS ROAD**

City  
**BEULAH**

State  
**MI**

Zip Code  
**49617-9562**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**299.84**

Date of Receipt

**02 / 16 / 2025**

**Transaction ID : SA11A.27694907**

Amount of Each Receipt this Period

**25.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETRITZ, GEORGE, L., ,**

Mailing Address **4811 ROGERS ROAD**

City  
**BEULAH**

State  
**MI**

Zip Code  
**49617-9562**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**299.84**

Date of Receipt

**02 / 16 / 2025**

**Transaction ID : SA11A.27694915**

Amount of Each Receipt this Period

**10.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETROSKE, SARAH, , ,**

Mailing Address **518 FAIRFAX AVE.**

City  
**NORFOLK**

State  
**VA**

Zip Code  
**23507-2110**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**231.11**

Date of Receipt

**02 / 16 / 2025**

**Transaction ID : SA11A.27693782**

Amount of Each Receipt this Period

**2.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**37.00**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3446 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695339**

Amount of Each Receipt this Period

1.88

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHILLIPS, KAREN, , ,**

Mailing Address 13888 STATE ROAD 32 EAST

City  
NOBLESVILLEState  
INZip Code  
46060-8858FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694067**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694608**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3447 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695198**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PINCHES, CYNTHIA, , ,**

Mailing Address 16 BUNKER HILL ROAD

City  
NEW BRITAINState  
CTZip Code  
06053-2206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1376.26

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693880**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693311**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3448 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693530**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POSS, MARY, , ,**

Mailing Address 6405 MERCEDES AVENUE

City  
DALLASState  
TXZip Code  
75214-3112FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EBBY HALLIDAY FOUNDATIONOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693561**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRESTON, BRADLEY, B., MR.,**

Mailing Address 2109 SOMMER ST

City  
NAPAState  
CAZip Code  
94559-4306FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

349.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693415**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.59

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3449 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PURDON, THOMAS, F., MR.,**

Mailing Address 8550 W CONTINENTAL DR

City  
PEORIA

State  
AZ

Zip Code  
85382-2702

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.84

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27694153**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUINTANA, VIRGINIA, , MRS.,**

Mailing Address 6601 RANCHO SANTA FE DR.

City  
LAS VEGAS

State  
NV

Zip Code  
89130-1725

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1622.60

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693391**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAINEY, DAVID, L., MR.,**

Mailing Address 1791 RAMPART DR.

City  
ALEXANDRIA

State  
VA

Zip Code  
22308-1655

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.78

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693765**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

94.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3450 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REEVES, BOB, R., MR.,**

Mailing Address 4500 S ROLLING HILLS RD

City  
COLUMBIAState  
MOZip Code  
65201-8828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

954.30

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694892**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REITER, RUSSEL, J., ,**

Mailing Address 14275 SAVANNAH PASS

City  
SAN ANTONIOState  
TXZip Code  
78216-7849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STATE OF TEXASOccupation (for Individual)  
SCIENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694674**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIBA, BRADLEY, A., MR.,**

Mailing Address 513 4TH AVE. NE

City  
SARTELLState  
MNZip Code  
56377-2123FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.82

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694664**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3451 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIBANDO, JOHN, , ,**

Mailing Address 1950 WILLOW RUN BLVD

City  
LEMARSState  
IAZip Code  
51031-8698FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.32

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695103**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695090**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIGGS, RUSSELL, , ,**

Mailing Address P.O. BOX 493

City  
SEDALIAState  
COZip Code  
80135-0493FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DOUBLE R EXCAVATINGOccupation (for Individual)  
HEAVY EQUIPMENT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

258.21

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694070**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

142.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3452 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIGGS, RUSSELL, , ,**

Mailing Address P.O. BOX 493

City  
SEDALIAState  
COZip Code  
80135-0493FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DOUBLE R EXCAVATINGOccupation (for Individual)  
HEAVY EQUIPMENT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694089**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODRIGUE, MERRY, , MS.,**

Mailing Address 307 WOODWAY DR

City  
HOUMAState  
LAZip Code  
70363-3846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693692**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, CLAUDETTE, C., MS.,**

Mailing Address 24290 HATTERAS ST

City  
WOODLAND HILLSState  
CAZip Code  
91367-3937FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694571**

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.84



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3453 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, JIM, , ,**

Mailing Address 443 CRABAPPLE DR.

City  
HOWARD

State  
OH

Zip Code  
43028-9575

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.50

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693434**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROGERS, WANDA, , ,**

Mailing Address 3701 W MCNAB RD  
APT 110

City  
POMPANO BEACH

State  
FL

Zip Code  
33069-4931

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.35

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27694677**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROHRIG, SHELLEY, J., ,**

Mailing Address 49 MASER AVENUE

City  
WHEELING

State  
WV

Zip Code  
26003-7246

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

241.80

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693318**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

71.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3454 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROSE, BOWEN, , ,**

Mailing Address 105 E MAIN ST.

City  
EDNAState  
TXZip Code  
77957-2826FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.34

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693538**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROSE, BOWEN, , ,**

Mailing Address 105 E MAIN ST.

City  
EDNAState  
TXZip Code  
77957-2826FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.34

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693542**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROWAN, LORI, , ,**

Mailing Address 10394 MARBLE EGRET DRIVE

City  
JACKSONVILLEState  
FLZip Code  
32257-4768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695299**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

44.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3455 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693478**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693986**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695192**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3456 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693564

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SACHNOFF, BRUCE, , ,**

Mailing Address 126 FIELD CLUB ROAD

City

PITTSBURGH

State

PA

Zip Code

15238-2238

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

694.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693798

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SACHNOFF, BRUCE, , ,**

Mailing Address 126 FIELD CLUB ROAD

City

PITTSBURGH

State

PA

Zip Code

15238-2238

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

694.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693805

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

157.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3457 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, MARK, , ,**

Mailing Address 11315 BOTHWELL WAY

City  
HOUSTONState  
TXZip Code  
77024-5302FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MARK SANDERS M.D. FACSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695305**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, MELVIN, , ,**

Mailing Address 4039 MAYFLOWER CT SW

City  
LILBURNState  
GAZip Code  
30047-3206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694289**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANTORO, NANCY, , ,**

Mailing Address P.O. BOX 2095

City  
RANCHO SANTA FEState  
CAZip Code  
92067-2095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1476.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694154**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

307.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3458 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHAFLE, MARK, , ,**

Mailing Address PO BOX 572

City  
MINDENState  
NVZip Code  
89423-0572FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693822

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHAFFNIT, WAYNE, , ,**

Mailing Address 340 DUNCAN ST

City  
SAN FRANCISCOState  
CAZip Code  
94131-2022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694971

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHERMER, GREGORY, P., MR.,**

Mailing Address 2911 E 32ND ST.

City  
DAVENPORTState  
IAZip Code  
52807-2405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LEE ENTERPRISESOccupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27695353

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

162.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3459 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHIPPER, GERRIT, , ,**

Mailing Address 2344 DIXON RD

City  
FREDERICKState  
MDZip Code  
21704-8131FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CWCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693755**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHIPPER, HAROLD, S., MR., JR.**

Mailing Address 1450 NORTH RHODE ISLAND AVENUE

City  
MASON CITYState  
IAZip Code  
50401-1446FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.86

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695317**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLOSSTEIN, GARY, B., MR.,**

Mailing Address W1586 COUNTY RD. KK

City  
ALMAState  
WIZip Code  
54610-8404FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694941**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3460 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLOUGH, JAMES, , ,**

Mailing Address 3810 CHURCH HILL

City  
CRYSTAL LAKEState  
ILZip Code  
60014-6511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693440**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHMIEDERER, BEVERLY, , ,**

Mailing Address 8937 ISLAND VIEW DR.

City  
POLK CITYState  
FLZip Code  
33868-9654FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694643**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHNEIDER, LYNN, , ,**

Mailing Address 18891 6485 RD

City  
MONTROSEState  
COZip Code  
81403-7890FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694547**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

132.80



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3461 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEPHTON, GAYLE, , ,**

Mailing Address 150E LAKESHORE DR. #72

City

LAKE ELSINORE

State

CA

Zip Code

92530-4241

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27695341

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEVERSON, JOHN, , MR.,**Mailing Address 101 S FT LAUDERDALE BEACH BLVD  
APT 601

City

FORT LAUDERDALE

State

FL

Zip Code

33316-1558

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

COVINGTON FABRIC &amp; DESIGN, LLC

Occupation (for Individual)

EVP

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694621

Amount of Each Receipt this Period

350.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHAYS, LORRAINE, , ,**

Mailing Address 14659 CANALVIEW DRIVE APT A

City

DELRAY BEACH

State

FL

Zip Code

33484-3722

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

483.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693317

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

405.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3462 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694922**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHRINER, ROBERT, , ,**

Mailing Address 519 MIAMI CLUB CT

City  
MISHAWAKAState  
INZip Code  
46544-2675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1435.65

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693766**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLEEPER, JOSH, , ,**

Mailing Address 71207 HWY 21

City  
COVINGTONState  
LAZip Code  
70433-7121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LHAOccupation (for Individual)  
HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693869**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3463 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLEEPER, JOSH, , ,**

Mailing Address 71207 HWY 21

City  
COVINGTONState  
LAZip Code  
70433-7121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LHAOccupation (for Individual)  
HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694932**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLEEPER, JOSH, , ,**

Mailing Address 71207 HWY 21

City  
COVINGTONState  
LAZip Code  
70433-7121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LHAOccupation (for Individual)  
HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694934**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMALLWOOD, MARJORIE, , MS.,**

Mailing Address 2315 ATTALA ROAD 3121

City  
VAIDENState  
MSZip Code  
39176-9549FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

286.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694988**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3464 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSON

State  
MO

Zip Code  
64831-9895

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.30

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27693497**

Amount of Each Receipt this Period

3.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSON

State  
MO

Zip Code  
64831-9895

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.30

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27694010**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOMMERVILLE, WILLIAM, , ,**

Mailing Address 445 BONVUE TERRACE

City  
LAGUNA BEACH

State  
CA

Zip Code  
92651-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2082.04

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27694682**

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1081.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3465 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693598**

Amount of Each Receipt this Period

2.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693402**

Amount of Each Receipt this Period

0.57

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693490**

Amount of Each Receipt this Period

1.83

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3466 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STOCKS, LAURENCE, , ,**

Mailing Address 290 SUSSEX PL.

City  
CARSON CITYState  
NVZip Code  
89703-5360FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693366**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STONE, WILLIAM, , ,**

Mailing Address 2464 HEDIGHAM BLVD

City  
WIXOMState  
MIZip Code  
48393-1720FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693999**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRAWBRIDGE, ROBERT, ALLEN, MR.,**

Mailing Address 120 VISION PARK BLVD 143

City  
CONROEState  
TXZip Code  
77384-3022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

656.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694328**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3467 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRAWBRIDGE, ROBERT, ALLEN, MR.,**

Mailing Address 120 VISION PARK BLVD 143

City  
CONROEState  
TXZip Code  
77384-3022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694358**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRAWBRIDGE, ROBERT, ALLEN, MR.,**

Mailing Address 120 VISION PARK BLVD 143

City  
CONROEState  
TXZip Code  
77384-3022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694367**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STREET, ROY, L., MR.,**

Mailing Address 475 GENTRY WAY

City  
RENOState  
NVZip Code  
89502-4610FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

322.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693921**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3468 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STURGILL, LARRY, , ,**

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693824**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694257**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUDOL, JEAN, , ,**

Mailing Address 2640 GATELY DRIVE WEST

City  
WEST PALM BEACHState  
FLZip Code  
33415-7996FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.79

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693693**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48.85



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3469 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SYLVESTRI, RONALD, J., MR.,**

Mailing Address 333 WEST STREET # 5

City  
DARIENState  
CTZip Code  
06820-4038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695197**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TARR, ANNE, , ,**

Mailing Address 13306 SOUTHWALK

City

SAN ANTONIO

State

TX

Zip Code

78232-4843

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

987.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693900**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City

MISSOULA

State

MT

Zip Code

59804-5849

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

562.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693466**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3470 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THIELEN, THEO, , ,**

Mailing Address 509 8TH ST W

City  
PARK RAPIDSState  
MNZip Code  
56470-1375FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THIELEN MOTORS INC.Occupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.87

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693348**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMA, BARBARA, , ,**

Mailing Address 47 CORDOBA POINT

City  
SUNRISE BEACHState  
MOZip Code  
65079-5810FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.79

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693923**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMA, BARBARA, , ,**

Mailing Address 47 CORDOBA POINT

City  
SUNRISE BEACHState  
MOZip Code  
65079-5810FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.79

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694108**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3471 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TITUS, ALDONA, , ,**

Mailing Address 7214 WEST CROSS CREEK TRAIL

City  
BRECKSVILLEState  
OHZip Code  
44141-3143FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694261**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TODD, LESTER, , ,**

Mailing Address 1115 BLUERIDGE DR.

City  
CANYON LAKEState  
TXZip Code  
78133-4185FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STUDENT TRANSPORTATION OF AMERICAOccupation (for Individual)  
BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693913**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TULLAI, SARAH, L., MRS.,**

Mailing Address 14900 W GOLDWATER RIDGE DR.

City  
SURPRISEState  
AZZip Code  
85374-9551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694636**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

169.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3472 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693746**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695171**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TUTHILL, JOHN, A., MR.,**

Mailing Address 20413 W. 56TH AVE.

City  
GOLDENState  
COZip Code  
80403-8004FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.78

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693322**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3473 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ULZHEIMER, BOB, , ,**

Mailing Address 4011 GUNNIN ROAD

City  
NORCROSSState  
GAZip Code  
30092-1949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693444**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VALENTI, DOMINICK, , ,**

Mailing Address 1105 OAK PARK DR.

City  
ANGLETONState  
TXZip Code  
77515-7869FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27695196**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN BERGEN, RICHARD, T., MR.,**

Mailing Address 2824 GABLER AVE SE

City  
BUFFALOState  
MNZip Code  
55313-5202FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694601**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

201.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3474 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693511**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VATTHAUER, VIRGENE, A., MRS.,**

Mailing Address 1321STRATFORD COURT

City  
MIDDLETONState  
WIZip Code  
53562-3675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.65

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694180**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VENNUM, PAULINE, , ,**

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDOState  
FLZip Code  
32801-4360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

675.43

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694749**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3475 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VIDAL, MILLIE, , ,**

Mailing Address 280 ACACIA AVE

City  
SAN BRUNOState  
CAZip Code  
94066-4845FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.96

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694615**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VILLABONA, MARTHA, , ,**

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMIState  
FLZip Code  
33143-8048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693439**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695116**

Amount of Each Receipt this Period

1.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3476 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WADHAM, THOMAS, A., ,**

Mailing Address 600 FOREST GROVE AVE

City  
DAYTONState  
OHZip Code  
45406-4434FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.41

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693324**

Amount of Each Receipt this Period

3.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKER, LUCINDA, , ,**

Mailing Address 67 IRVING AVENUE, P.O. BOX 507

City  
HYANNIS PORTState  
MAZip Code  
02647-0507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.04

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694442**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALKER, LUCINDA, , ,**

Mailing Address 67 IRVING AVENUE, P.O. BOX 507

City  
HYANNIS PORTState  
MAZip Code  
02647-0507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

610.04

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695075**

Amount of Each Receipt this Period

24.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.80



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3477 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALKER, PATRICIA, V., MS.,**

Mailing Address 1470 RIVERVIEW DR.

City  
LEWISPORTState  
KYZip Code  
42351-2434FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.65

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694926**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKINGTON, PAT, , ,**

Mailing Address 11765 N 135TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-3633FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.56

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27693874**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALLS, DIANE JANE, , ,**

Mailing Address 1882 VISTA HILLS DR.

City  
NAVASOTAState  
TXZip Code  
77868-6966FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

697.50

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27695364**

Amount of Each Receipt this Period

2.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3478 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATERS, TIM, , ,**

Mailing Address 4318 WINDWILLOW LN

City  
CLERMONTState  
FLZip Code  
34714-6277FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693991**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRISTOL MYERS SQUIBBOccupation (for Individual)  
COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27693369**

Amount of Each Receipt this Period

0.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEATHERLY, CINDI, , ,**

Mailing Address 4690 MEADOW SPRINGS DRIVE

City  
WATKINSVILLEState  
GAZip Code  
30677-4642FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

394.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694005**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3479 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEATHERMAN, GLENNA, F., ,**

Mailing Address 853 S NEWHAVEN DR.

City  
ORANGEState  
CAZip Code  
92869-5443FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694029

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEIGAND, CRAIG, , MR.,**

Mailing Address 2289 S ISABELL ST

City  
LAKEWOODState  
COZip Code  
80228-6460FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694041

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEIGAND, CRAIG, , MR.,**

Mailing Address 2289 S ISABELL ST

City  
LAKEWOODState  
COZip Code  
80228-6460FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694048

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3480 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELSH, THERESA, , ,**

Mailing Address 2015 OLD BALSAM RD

City  
WAYNESVILLE

State  
NC

Zip Code  
28786-8036

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.50

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27695205**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESNER, EDWARD, , ,**

Mailing Address 16717E 920 RD

City  
REYDON

State  
OK

Zip Code  
73660-5091

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
RANCHER528148

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.93

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27694582**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WESTFALL, ANNE, , ,**

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIA

State  
WA

Zip Code  
98531-8894

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

479.93

Date of Receipt

02 / 16 / 2025

**Transaction ID : SA11A.27693299**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

110.37

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3481 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WESTFALL, ANNE, , ,

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIAState  
WAZip Code  
98531-8894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693428

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHEELER, MIEKA, L., ,

Mailing Address 27230 STONEY BROOK DR

City  
TRENTONState  
MIZip Code  
48183-4640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693602

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHEELER, MIEKA, L., ,

Mailing Address 27230 STONEY BROOK DR

City  
TRENTONState  
MIZip Code  
48183-4640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

554.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693636

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3482 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITBREAD, ELLEN, , ,**

Mailing Address 915 SCHOONERS BAY DRIVE

City  
JACKSONVILLEState  
FLZip Code  
32233-2920FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27695028

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITE, BARBARA, A., ,**

Mailing Address 10225 CARROLL RD

City  
COLUMBUSState  
MIZip Code  
48063-1001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693320

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITE, SHARON, A., MRS.,**

Mailing Address 1235 NORFOLK WAY

City  
SACRAMENTOState  
CAZip Code  
95831-1827FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TWIN RIVERS UNIFIED SCHOOL DISTRICTOccupation (for Individual)  
RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693568

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

189.10

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3483 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHITTEN, JAMES, , MR.,

Mailing Address P.O. BOX 860

City  
MATEWANState  
WVZip Code  
25678-0860FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MODERN ENGEOccupation (for Individual)  
PROJECT COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693423

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WIEL, CAROL, L., MS.,

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693533

Amount of Each Receipt this Period

2.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILKINS, BELINDA, , ,

Mailing Address 1105 RATLIFF ST

City  
OZONAState  
TXZip Code  
76943-4455FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

412.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694432

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.29

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3484 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, BETTY, , ,**

Mailing Address 311 HARPER LOOP

City  
GRANTS PASS

State  
OR

Zip Code  
97527-5339

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

**Transaction ID : SA11A.27694607**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, CATHERINE, L., ,**

Mailing Address PO BOX 127

City  
SCHERTZ

State  
TX

Zip Code  
78154-0127

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

**Transaction ID : SA11A.27693567**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMS, LAURA, , ,**

Mailing Address 591 SAND POINT ROAD

City  
CARPINTERIA

State  
CA

Zip Code  
93013-1101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1041.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

**Transaction ID : SA11A.27694841**

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1087.46



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3485 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIS, STEVEN, , ,**

Mailing Address 7500 W HWY 42

City  
GOSHENState  
KYZip Code  
40026-8794FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US HOUSING COMPONENTSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694172**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, AUDREY, , ,**

Mailing Address 5216 N MALLORCA WAY

City  
MERIDIANState  
IDZip Code  
83646-7473FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694943**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINGFIELD, REBECCA, C., MRS.,**

Mailing Address 11800 CYPRESS RD

City  
DIXONState  
MOZip Code  
65459-7212FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

447.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025**Transaction ID : SA11A.27694583**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3486 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODHOUSE, MARILYN, M., MRS.,**

Mailing Address 650 RAMBLEWOOD RD.

City  
HOUSTONState  
TXZip Code  
77079-6905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2197.50

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694281**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODHOUSE, MARILYN, M., MRS.,**

Mailing Address 650 RAMBLEWOOD RD.

City  
HOUSTONState  
TXZip Code  
77079-6905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2197.50

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694562**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODRUFF, RICHARD, , ,**Mailing Address 5430 NEW NORTHSIDE DR.  
SUITE 200City  
ATLANTAState  
GAZip Code  
30339-7424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HONDA CARLANDOccupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

401.03

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025**Transaction ID : SA11A.27694593**

Amount of Each Receipt this Period

60.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

260.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3487 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOOTTEN, RIKE, , ,**

Mailing Address 2100 S JOSEPHINE ST  
UNIT 4106

City  
DENVER

State  
CO

Zip Code  
80210-4852

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693388**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROE

State  
TX

Zip Code  
77304-4430

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693524**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROE

State  
TX

Zip Code  
77304-4430

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2025

**Transaction ID : SA11A.27693819**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

53.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3488 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693826

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694652

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694999

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.98

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3489 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YOUNG, PATRICIA, , ,

Mailing Address 9940 PREMIERE VIEW CIR

City  
HAGERSTOWNState  
MDZip Code  
21740-8904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27693876

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YSURSA, GENEVIEVE, , ,

Mailing Address 3628 E. WARM SORINGS

City  
BOISEState  
IDZip Code  
83716-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BISHOP KELLY HIGHOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27695145

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZEIGLER, DANIEL, F., MR.,

Mailing Address 1088 LOCKCUFF RD

City  
WILLIAMSPORTState  
PAZip Code  
17701-8532FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

448.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2025

Transaction ID : SA11A.27694953

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

119.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3490 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

**Transaction ID : SA11C.27696351**

Amount of Each Receipt this Period

77143.28

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABT, OLIVE, MAY, MS.,**

Mailing Address 8700B ARTHUR KNIGHT DR. APT. 206

City  
PERRY HALLState  
MDZip Code  
21128-8026FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

**Transaction ID : SA11A.27698116**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMS, PHIL, , ,**

Mailing Address 6126 EDGEWOOD TER

City  
ALEXANDRIAState  
VAZip Code  
22307-1125FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

TARGETED VICTORY

MANAGING PARTNER

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

**Transaction ID : SA11A.27697715**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

5052.05

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3491 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AHN, ROGER, , ,**

Mailing Address 2807 NORTH 160 STREET

City  
OMAHAState  
NEZip Code  
68116-2061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697955**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALBANESE, WILLIAM, , ,**

Mailing Address 3 BIRD HILL LANE

City

SANTA CRUZ

State

CA

Zip Code

95060-1801

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697622**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALFARO, ROSA, , ,**

Mailing Address 3059 HAWKSCREST DR

City

WINCHESTER

State

CA

Zip Code

92596-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

710.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696765**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3492 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALYN, IRENE, B., ,**

Mailing Address 419 TOWN ROAD

City  
DAYTONState  
PAZip Code  
16222-5513FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.60

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696685**

Amount of Each Receipt this Period

22.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALYN, IRENE, B., ,**

Mailing Address 419 TOWN ROAD

City  
DAYTONState  
PAZip Code  
16222-5513FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.60

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696901**

Amount of Each Receipt this Period

21.86

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMSTUTZ, SHERYL, , ,**Mailing Address 1307 S WATER ST  
UNIT 90City  
SILVERTONState  
ORZip Code  
97381-2471FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

866.44

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698087**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.76



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3493 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRIS

State  
GA

Zip Code  
30582-1957

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

**Transaction ID : SA11A.27696860**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRIS

State  
GA

Zip Code  
30582-1957

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

**Transaction ID : SA11A.27698410**

Amount of Each Receipt this Period

3.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, JANET, , MS.,**

Mailing Address 2905 MOCKINGBIRD TRL

City  
CASPER

State  
WY

Zip Code  
82604-3641

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.42

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

**Transaction ID : SA11A.27697574**

Amount of Each Receipt this Period

0.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

40.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3494 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, JANET, , MS.,**

Mailing Address 2905 MOCKINGBIRD TRL

City  
CASPERState  
WYZip Code  
82604-3641FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697585**

Amount of Each Receipt this Period

0.45

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, JANET, , MS.,**

Mailing Address 2905 MOCKINGBIRD TRL

City  
CASPERState  
WYZip Code  
82604-3641FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697586**

Amount of Each Receipt this Period

0.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697213**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

31.80

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3495 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, MIKE, , ,

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697215

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDERSON, MIKE, , ,

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697217

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDERSON, MIKE, , ,

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697224

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3496 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697229**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARNOLD, RUSSELL, , ,**

Mailing Address 966 BLUESTEM DRIVE

City  
GENEVAState  
ILZip Code  
60134-3732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698479**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BANWART, ANGELA, , ,**

Mailing Address 1942 WHITE DOGWOOD

City  
FLEMING ISLANDState  
FLZip Code  
32003-3366FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698450**

Amount of Each Receipt this Period

156.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

223.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3497 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BATTISTONI, RICHARD, , ,**

Mailing Address 40543 EYOTA CT

City  
MURRIETAState  
CAZip Code  
92562-5884FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COSTCO WHOLESALEOccupation (for Individual)  
RETAIL MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696792**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEGGS, ED, , ,**

Mailing Address 306 W 7TH ST

City  
FORT WORTHState  
TXZip Code  
76102-4900FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BEGGS CATTLE CO.Occupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697833**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BELL, BONNIE, , ,**

Mailing Address 778 1ST ST NW

City  
SAINT PAULState  
MNZip Code  
55112-3216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697811**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

153.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3498 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BELLOCK, MARGARET, J., MS.,**

Mailing Address 1149 TERRACE CT

City  
LAKE GENEVAState  
WIZip Code  
53147-5027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697293**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BENNETT, BOB, , ,**

Mailing Address 14474 NAVAJO WAY

City  
MANTECAState  
CAZip Code  
95336-2546FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697952**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERG, ELIZABETH, , ,**Mailing Address 555 MAIN ST  
APT 606SCity  
NEW YORKState  
NYZip Code  
10044-0165FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697448**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

288.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3499 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERGER, BRUCE, , ,**

Mailing Address 600 E HOPKINS AVE

City  
ASPENState  
COZip Code  
81611-1949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698475

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERRY, TERRY, , ,**

Mailing Address 1758 BROOKE ROAD

City  
STAFFORDState  
VAZip Code  
22554-5524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3644.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697011

Amount of Each Receipt this Period

495.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERRY, TERRY, , ,**

Mailing Address 1758 BROOKE ROAD

City  
STAFFORDState  
VAZip Code  
22554-5524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3644.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698142

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1015.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3500 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BESWICK, JANE, ELIZABETH, MS.,**

Mailing Address PO BOX 153

City  
FRENCH CAMPState  
MSZip Code  
39745-0153FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.88

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696568**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.04

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697330**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

891.04

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697333**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3501 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIO

State  
TX

Zip Code  
78840-5619

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.04

Date of Receipt

**02** / **17** / **2025**

**Transaction ID : SA11A.27697338**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIO

State  
TX

Zip Code  
78840-5619

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.04

Date of Receipt

**02** / **17** / **2025**

**Transaction ID : SA11A.27697341**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BIDDLE, GARY, , ,**

Mailing Address 15 BIDDLE ROAD

City  
CARLISLE

State  
PA

Zip Code  
17015-9794

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SAMTEC

Occupation (for Individual)  
ENGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**02** / **17** / **2025**

**Transaction ID : SA11A.27697475**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

95.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3502 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BINIENDA, MARY, E., MS.,**Mailing Address 28413 ABBEY LN  
APT 172City  
NEW HUDSONState  
MIZip Code  
48165-2804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.38

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698412**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BINIENDA, MARY, E., MS.,**Mailing Address 28413 ABBEY LN  
APT 172City  
NEW HUDSONState  
MIZip Code  
48165-2804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.38

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698414**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BIRDLEBOUGH, MICHAEL, , ,**

Mailing Address 201 CRESTWOOD DR.

City  
FREDERICKSBURGState  
TXZip Code  
78624-2803FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698194**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

80.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3503 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BIRDLEBOUGH, MICHAEL, , ,**

Mailing Address 201 CRESTWOOD DR.

City  
FREDERICKSBURGState  
TXZip Code  
78624-2803FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698195**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLAUVELT, SHIRLEY, M., MS.,**

Mailing Address 15523 CHENAL RD.

City  
JARREAUState  
LAZip Code  
70749-3513FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696355**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOECKMANN, DAVID, , ,**

Mailing Address 1964 HWY 334

City  
FORREST CITYState  
ARZip Code  
72335-7950FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
USACEOccupation (for Individual)  
EQUIPMENT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.32

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697852**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.08

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3504 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTON

State  
MO

Zip Code  
64012-4207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

**Transaction ID : SA11A.27697252**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTON

State  
TX

Zip Code  
77077-3846

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

**Transaction ID : SA11A.27696555**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTON

State  
TX

Zip Code  
77077-3846

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

820.31

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

**Transaction ID : SA11A.27696604**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.77

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3505 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTON

State  
TX

Zip Code  
77077-3846

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

**Transaction ID : SA11A.27696607**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTON

State  
TX

Zip Code  
77077-3846

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

**Transaction ID : SA11A.27697495**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTON

State  
TX

Zip Code  
77077-3846

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

820.31

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

**Transaction ID : SA11A.27697496**

Amount of Each Receipt this Period

7.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

33.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3506 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697497

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697498

Amount of Each Receipt this Period

7.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697499

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

16.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3507 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697501

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUGHER, MARY, LOU, ,**

Mailing Address 103 CIRCLE DR.

City  
MAYFIELDState  
KYZip Code  
42066-6902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696438

Amount of Each Receipt this Period

94.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOWMAN, ROSEMARIE, , ,**

Mailing Address 233 MCLEOD AVE

City  
MISSOULAState  
MTZip Code  
59801-4303FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

385.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697346

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3508 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOX, JAMES, , MR., JR.**

Mailing Address 3810 OLD LEXINGTON RD

City  
ATHENSState  
GAZip Code  
30605-4149FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698013

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYDA, KENNETH, , ,**

Mailing Address 1200 BARTON CREEK BLVD, #58

City  
AUSTINState  
TXZip Code  
78735-1633FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697355

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYDA, KENNETH, , ,**

Mailing Address 1200 BARTON CREEK BLVD, #58

City  
AUSTINState  
TXZip Code  
78735-1633FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

387.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697356

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

64.81



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3509 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYDA, KENNETH, , ,**

Mailing Address 1200 BARTON CREEK BLVD, #58

City  
AUSTINState  
TXZip Code  
78735-1633FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697362

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYNTON, LINDA, A., ,**

Mailing Address 15877 FOUR CORNER RD

City

PRAIRIE GROVE

State

AR

Zip Code

72753-9244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696576

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRADSHAW, JEANIE, , ,**

Mailing Address 251 SMOKERISE TRACE

City

PEACHTREE CITY

State

GA

Zip Code

30269-1301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

276.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696976

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

73.52

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3510 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRADSHAW, JEANIE, , ,**

Mailing Address 251 SMOKERISE TRACE

City  
PEACHTREE CITY

State  
GA

Zip Code  
30269-1301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.86

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

**Transaction ID : SA11A.27696984**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRADSHAW, JEANIE, , ,**

Mailing Address 251 SMOKERISE TRACE

City  
PEACHTREE CITY

State  
GA

Zip Code  
30269-1301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.86

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

**Transaction ID : SA11A.27697395**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRADSHAW, JEANIE, , ,**

Mailing Address 251 SMOKERISE TRACE

City  
PEACHTREE CITY

State  
GA

Zip Code  
30269-1301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

276.86

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

**Transaction ID : SA11A.27697397**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3511 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRNAK, JIM, , ,**

Mailing Address 110 WEST MORGAN AVENUE

City  
KEENESBURGState  
COZip Code  
80643-9042FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698394**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, FRANCES, P., ,**

Mailing Address 226 BLUE STONE HILLS DR.

City  
HARRISONBURGState  
VAZip Code  
22801-3411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697071**

Amount of Each Receipt this Period

17.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, FRANCES, P., ,**

Mailing Address 226 BLUE STONE HILLS DR.

City  
HARRISONBURGState  
VAZip Code  
22801-3411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697120**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3512 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, FRANCES, P., ,**

Mailing Address 226 BLUE STONE HILLS DR.

City  
HARRISONBURGState  
VAZip Code  
22801-3411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697147**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, FRANCES, P., ,**

Mailing Address 226 BLUE STONE HILLS DR.

City  
HARRISONBURGState  
VAZip Code  
22801-3411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697739**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, JENISE, , ,**

Mailing Address 10370 SW WESTLAWN BLVD

City  
PORT SAINT LUCIEState  
FLZip Code  
34987-2463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.25

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696815**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3513 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, KATHLEEN, , ,**

Mailing Address 12707 WEST CAMBRIDGE AVE

City  
AVONDALEState  
AZZip Code  
85392-7068FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697348

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, KATHLEEN, , ,**

Mailing Address 12707 WEST CAMBRIDGE AVE

City  
AVONDALEState  
AZZip Code  
85392-7068FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697384

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, KATHLEEN, , ,**

Mailing Address 12707 WEST CAMBRIDGE AVE

City  
AVONDALEState  
AZZip Code  
85392-7068FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698165

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3514 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, ROGER, D., ,**

Mailing Address 4609 MARBELLA CIR

City  
FORT WORTHState  
TXZip Code  
76126-1927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

631.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697857

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, ROGER, D., ,**

Mailing Address 4609 MARBELLA CIR

City  
FORT WORTHState  
TXZip Code  
76126-1927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

631.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697871

Amount of Each Receipt this Period

94.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRYAN, NATHAN, , ,**

Mailing Address 340 LIVE OAK ROAD

City  
PAICINESState  
CAZip Code  
95043-9718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PINNACLES TELEPHONE CO.Occupation (for Individual)  
TELECOMMUNICATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

211.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697582

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

161.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3515 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUCHANAN, JAMES, F., MR.,**

Mailing Address 217 ROSEBUD AVE

City  
CORPUS CHRISTIState  
TXZip Code  
78404-1734FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WELDER LESHIN LLPOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697461**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURCHER, PAT, , ,**

Mailing Address 3700 LAKE POWHATAN

City  
WILLIAMSBURGState  
VAZip Code  
23188-8035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697468**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURNS, NANCY, , ,**

Mailing Address 497 GREENWICH ST. APT. 8B

City  
NEW YORKState  
NYZip Code  
10013-1314FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

308.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698008**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3516 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURR, LAWRENCE, , MR.,**

Mailing Address 31065 CASTLE RIDGE DRIVE

City  
BROOKSVILLEState  
FLZip Code  
34602-7529FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697310**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURR, LAWRENCE, , MR.,**

Mailing Address 31065 CASTLE RIDGE DRIVE

City  
BROOKSVILLEState  
FLZip Code  
34602-7529FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697882**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUSBY, CHARLOTTE, , ,**

Mailing Address 5110 BEECH ST

City  
BELLAIREState  
TXZip Code  
77401-3327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1628.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697408**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3517 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUSBY, CHARLOTTE, , ,**

Mailing Address 5110 BEECH ST

City  
BELLAIREState  
TXZip Code  
77401-3327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1628.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697422**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUSS, DIETRICH, G., MR.,**

Mailing Address 1518 CAMINO DEL SOL

City  
FULLERTONState  
CAZip Code  
92833-1915FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698533**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CALZADA, MARGARITA, Y., ,**

Mailing Address 11375 SAGE AVENUE

City  
FONTANAState  
CAZip Code  
92337-0119FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CHAPARRAL MEDICAL GROUPOccupation (for Individual)  
PATIENT SERVICES REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696403**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3518 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAPITO, RICHARD, , ,**

Mailing Address 1097 FLEDDERJOHN ROAD

City  
CHARLESTONState  
WVZip Code  
25314-4208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THSPPOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.05

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697851**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARBO, LINDA, , ,**

Mailing Address 23 SHIRRA AVENUE

City  
STATEN ISLANDState  
NYZip Code  
10314-4986FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.16

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696443**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARBO, LINDA, , ,**

Mailing Address 23 SHIRRA AVENUE

City  
STATEN ISLANDState  
NYZip Code  
10314-4986FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.16

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696447**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3519 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAREY, JAMES, , ,**

Mailing Address 2929 N. WEST AVE.

City  
FRESNOState  
CAZip Code  
93705-3902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JAGUAR APARTMENTSOccupation (for Individual)  
LANDLORD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697765

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARLSON, KENNETH, , ,**

Mailing Address 13341 BARWICK RD

City

BOYNTON BEACH

State

FL

Zip Code

33435-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697647

Amount of Each Receipt this Period

182.18

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City

GADSDEN

State

AL

Zip Code

35901-4055

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697248

Amount of Each Receipt this Period

94.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

311.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3520 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698415**

Amount of Each Receipt this Period

0.57

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARRIER, CONNIE, , ,**

Mailing Address 279 WEST 1080 SOUTH

City  
HURRICANEState  
UTZip Code  
84737-2345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HURRICANE FAMILY CLINICOccupation (for Individual)  
MEDICAL RECEPTIONIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697250**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAVERA, OFILIA, , ,**

Mailing Address 3100 TWISTED CREEK

City  
SAN ANTONIOState  
TXZip Code  
78230-4046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1048.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696575**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3521 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHAVERA, OFILIA, , ,**

Mailing Address 3100 TWISTED CREEK

City  
SAN ANTONIOState  
TXZip Code  
78230-4046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1048.13

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698453**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHRISTIANSEN, ALAN, L., MR.,**

Mailing Address 12121 W. WILMINGTON RD.

City  
PEOTONEState  
ILZip Code  
60468-9726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698398**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHRISTENSEN, CHRISTIAN, M., MR.,**

Mailing Address 5707 BEVERLY ST

City  
SAVANNAHState  
GAZip Code  
31405-2821FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF CUISOccupation (for Individual)  
ENTOMOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

258.20

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698150**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3522 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CIACCIO, JANE, , ,**Mailing Address 5491 BEECHMONT AVE  
APT 506City  
CINCINNATIState  
OHZip Code  
45230-1160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

841.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

**Transaction ID : SA11A.27696602**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CITRON, DIANE, M., MRS.,**

Mailing Address 2620 ARIZONA AVE, APT 3

City  
SANTA MONICAState  
CAZip Code  
90404-1415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

**Transaction ID : SA11A.27696848**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLARK, BARBARA, W., MRS.,**

Mailing Address 1170 GORDON COMBS RD NW

City  
MARIETTAState  
GAZip Code  
30064-1226FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ELEGANT IDEAS INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

562.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

**Transaction ID : SA11A.27698594**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3523 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLARK, BARBARA, W., MRS.,**

Mailing Address 1170 GORDON COMBS RD NW

City  
MARIETTAState  
GAZip Code  
30064-1226FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ELEGANT IDEAS INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698597**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, HARRY, , ,**

Mailing Address 1533 BRIAR HILL RD

City  
GLADWYNEState  
PAZip Code  
19035-1249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697978**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697210**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

154.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3524 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COWHEY, DENNIS, , ,**

Mailing Address 11861 MISTY ARBOR RUN

City  
FORT MYERSState  
FLZip Code  
33913-9417FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698005

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COWHEY, DENNIS, , ,**

Mailing Address 11861 MISTY ARBOR RUN

City  
FORT MYERSState  
FLZip Code  
33913-9417FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698007

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTONState  
IAZip Code  
50131-4796FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696682

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

71.04



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3525 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAWFORD, RANDY, , ,**

Mailing Address 6100 SHENANDOAH AVE.

City  
LOS ANGELESState  
CAZip Code  
90056-2021FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697154**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURRY, BERNADETTE, , ,**

Mailing Address 2000 S. ARLINGTON RIDGE RD

City  
ARLINGTONState  
VAZip Code  
22202-2119FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696419**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURRY, ROBERT, J., ,**

Mailing Address 1205 ANDTE CIR.

City  
CLAREMOREState  
OKZip Code  
74017-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698210**

Amount of Each Receipt this Period

0.19

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3526 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DABDOUB, JOHN, , ,**

Mailing Address 601 ASBURY DRIVE

City  
MANDEVILLEState  
LAZip Code  
70471-6506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697768**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAHLBERG, NANCY, , MRS.,**

Mailing Address 208 PONDEROSA PINE DR

City  
BLUE EYEState  
MOZip Code  
65611-8244FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INTERIOR DESIGNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697439**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DALE, PAMELA, , ,**

Mailing Address 18890 TIMBERLAKE DR

City  
CLAREMOREState  
OKZip Code  
74017-1443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697240**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3527 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DALLAVERDE, ANGELO, , ,**

Mailing Address 20A HEISZ ST

City  
KINGSTONState  
PAZip Code  
18704-4453FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.97

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698128**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DANIELS, CAROL, B., MS.,**

Mailing Address 3091 ORCHARD RIDGE CIR

City  
DULUTHState  
GAZip Code  
30096-7422FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697562**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DARR, LUCY, , ,**

Mailing Address 1017 GADWALL CIR

City  
HENDERSONVILLEState  
TNZip Code  
37075-6321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.29

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698592**

Amount of Each Receipt this Period

2.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3528 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698458**

Amount of Each Receipt this Period

0.19

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAVIDSON, JO, , ,**

Mailing Address POBOX336

City  
WASHINGTONState  
OKZip Code  
73093-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698183**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697404**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3529 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697625

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698145

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698146

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

94.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3530 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698154

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEGRISSELLES, JANET, , ,**

Mailing Address 14638 SAGAMORE COURT

City  
FORT MYERSState  
FLZip Code  
33908-4912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697365

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEGRISSELLES, JANET, , ,**

Mailing Address 14638 SAGAMORE COURT

City  
FORT MYERSState  
FLZip Code  
33908-4912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

426.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697516

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3531 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEGROOT, PAUL, , ,**

Mailing Address 1S500 FAIRVIEW AVE

City  
LOMBARDState  
ILZip Code  
60148-5017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1548.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696388**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DILL, MARY, , ,**

Mailing Address 35 SAN MARINO DR.

City  
SAN RAFAELState  
CAZip Code  
94901-1535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696353**

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DILL, MARY, , ,**

Mailing Address 35 SAN MARINO DR.

City  
SAN RAFAELState  
CAZip Code  
94901-1535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696356**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3532 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DILORENZO, ESTHER, , ,**

Mailing Address 46309 CORDOBA DRIVE

City  
NOVIState  
MIZip Code  
48374-2435FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697427

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIONNE, DOUGLAS, , ,**

Mailing Address 6122 WINDY KNL

City

WINDCREST

State

TX

Zip Code

78239-2655

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698160

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIXON, JOHN, , ,**

Mailing Address 11030 MADISON CT

City

BEAUMONT

State

TX

Zip Code

77705-9600

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WELLSFARGOADVISORSOccupation (for Individual)  
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

812.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697371

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

165.54



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3533 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOKKEN, KENNETH, , ,**

Mailing Address 12513 44TH DRIVE SOUTHEAST

City  
EVERETTState  
WAZip Code  
98208-9003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697831**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOLLE, BILL, , ,**

Mailing Address 92310 N FM 1264

City  
LUBBOCKState  
TXZip Code  
79415-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698141**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DORRE, JAMES, , ,**

Mailing Address 1206 SPRING VILLA CT

City  
JACKSONVILLEState  
NCZip Code  
28540-3313FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.89

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697480**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3534 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOWE, KATHLEEN, M., MRS.,**

Mailing Address 100 CALHOUN LN

City  
GEORGETOWNState  
TXZip Code  
78633-2212FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.22

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697030**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRISKILL, TIM, , ,**

Mailing Address 2940 E. 45TH PLACE

City  
TULSAState  
OKZip Code  
74105-5204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INSURANCEOccupation (for Individual)  
INS AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696836**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNCAN, CHARLES, L., MR.,**

Mailing Address 202 PRESERVATION CIRCLE

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-8220FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.47

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698554**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3535 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNNIVAN, BRYAN, D., MR.,**

Mailing Address 2348 EDESEL DR.

City  
MILPITASState  
CAZip Code  
95035-6110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PACIFIC ASSOCIATESOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.60

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697388**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DYKES, MARY, , ,**

Mailing Address 4611 18TH AVE

City  
COLUMBUSState  
GAZip Code  
31904-6027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.93

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697487**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EADES, LINDA, , ,**

Mailing Address 14250 STATE ROUTE JJ

City  
WEST PLAINSState  
MOZip Code  
65775-5834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.55

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696991**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3536 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EADES, LINDA, , ,**

Mailing Address 14250 STATE ROUTE JJ

City  
WEST PLAINSState  
MOZip Code  
65775-5834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697611**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697911**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-6174FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

640.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697706**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3537 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EDWARDS, DALE, , MR.,**

Mailing Address 124 SE SANDSTONE DR.

City  
BLUE SPRINGSState  
MOZip Code  
64014-3812FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697117**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EDWARDS, KEVIN, , ,**

Mailing Address 6153 FAIRLAWN DRIVE SW

City  
LAKEWOODState  
WAZip Code  
98499-2433FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRANSERVICE LOGISTICSOccupation (for Individual)  
COMMERCIAL DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696865**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EDWARDS, WALTER, C., DR.,**

Mailing Address 404 TOWNSEND PL NW

City  
ATLANTAState  
GAZip Code  
30327-3038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697175**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3538 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSONState  
MDZip Code  
21204-4701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696404**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSONState  
MDZip Code  
21204-4701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696895**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELIASSEN, JAMES, M., DR.,**

Mailing Address 1205 20TH ST SO

City  
VIRGINIAState  
MNZip Code  
55792-3724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697646**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.65

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3539 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMBORGO, MARITRESS, , ,

Mailing Address 62 WATERFORD CIRCLE

City  
NACOGDOCHESState  
TXZip Code  
75965-8730FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2025

Transaction ID : SA11A.27697449

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EYMIL, CHERYLE, , ,

Mailing Address 5008 KINGSWAY

City  
ANACORTESState  
WAZip Code  
98221-3016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2025

Transaction ID : SA11A.27697854

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FERINE, WALTER, , ,

Mailing Address 116 TIGER LN

City  
ANDERSONState  
SCZip Code  
29626-5757FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2025

Transaction ID : SA11A.27697111

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

40.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3540 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FIELDS, CONNIE, , ,**

Mailing Address 606 E MEDUSA ST

City  
SYRACUSEState  
INZip Code  
46567-1606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698407**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FINN, PATRICK, , MR., JR.**Mailing Address 15705 LARIMORE PLZ  
APT 2City  
OMAHAState  
NEZip Code  
68116-8801FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696364**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISCHER, STEPHEN, M., MR.,**

Mailing Address 17520 LAKESEGE TRAIL

City  
CHAGRIN FALLSState  
OHZip Code  
44023-2115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

832.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697164**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3541 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697616

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697617

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697618

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.11

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3542 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FLANAGAN, BARBARA, , ,

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

Transaction ID : SA11A.27697619

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FLANAGAN, BARBARA, , ,

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

Transaction ID : SA11A.27697620

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FLANAGAN, BARBARA, , ,

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

Transaction ID : SA11A.27697627

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

61.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3543 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLANAGAN, MICHAEL, , ,**

Mailing Address 2150 EAST WELLINGTON AVENUE

City  
SANTA ANAState  
CAZip Code  
92701-3184FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697525**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLETCHER, CHUCK, , ,**

Mailing Address 454 TAYLOR ROAD

City  
MONTGOMERYState  
ALZip Code  
36117-3563FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697850**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FORT, BRENDA, , ,**

Mailing Address 3572 ALDER PL

City  
CHINO HILLSState  
CAZip Code  
91709-2007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

258.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697136**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3544 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRANCE, SHERROD, W., MR.,**

Mailing Address PO BOX 607

City  
RAWLINSState  
WYZip Code  
82301-0607FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

977.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697366

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FREEMAN, JOANN, , ,**

Mailing Address 3588 COLUMBINE DRIVE

City  
SAN JOSEState  
CAZip Code  
95127-4928FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ST. OF CA IN-HOME SUPPORTIVE SERVICESOccupation (for Individual)  
PROVIDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696473

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRITZ, JOHN, , MR.,**

Mailing Address P.O. BOX 3115

City  
BIG BEAR LAKEState  
CAZip Code  
92315-3115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

986.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697251

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3545 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRITZ, JOHN, , MR.,**

Mailing Address P.O. BOX 3115

City  
BIG BEAR LAKEState  
CAZip Code  
92315-3115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697255

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRITZ, STEPHEN, , ,**

Mailing Address 194 TREDWELL AVENUE

City  
SAINT JAMESState  
NYZip Code  
11780-1806FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697884

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLAGHER, JERRY, , ,**

Mailing Address 3979COUNTY RD 826

City  
ANNAState  
TXZip Code  
75409-3016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

264.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697436

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

179.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3546 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697554

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697556

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697561

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3547 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLOWAY, JIM, , ,**

Mailing Address 6308 PARK AVENUE

City  
ATLANTAState  
GAZip Code  
30342-2362FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696944

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALLOWAY, JIM, , ,**

Mailing Address 6308 PARK AVENUE

City  
ATLANTAState  
GAZip Code  
30342-2362FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696950

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLOWAY, JIM, , ,**

Mailing Address 6308 PARK AVENUE

City  
ATLANTAState  
GAZip Code  
30342-2362FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696962

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

87.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3548 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GANO, JOHN, , ,**

Mailing Address P.O. BOX 6038

City  
TYLERState  
TXZip Code  
75711-6038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696729**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698333**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GERSEK, BARBARA, , ,**

Mailing Address 2153 ONTARIO ROAD

City  
GREEN BAYState  
WIZip Code  
54311-5016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

311.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696656**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.45



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3549 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILLESPIE, ALLISON, , ,**

Mailing Address 9730 VOYLES LOOP

City  
POLK CITYState  
FLZip Code  
33868-8957FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

SECURITY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697650**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILLESPIE, ALLISON, , ,**

Mailing Address 9730 VOYLES LOOP

City  
POLK CITYState  
FLZip Code  
33868-8957FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

SECURITY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697656**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIORDANO, MICHAEL, , ,**

Mailing Address 59 YOWAGO AVE

City  
BRANFORDState  
CTZip Code  
06405-5526FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

GIORDANO

Occupation (for Individual)

BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3029.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698324**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

258.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3550 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLANVILLE, NORMA, , ,**

Mailing Address 1664 PALMLAND DR.

City  
BOYNTON BEACHState  
FLZip Code  
33436-6044FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697454**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLASS, CALVIN, E., MR.,**

Mailing Address 414 LYNDBURST DR.

City  
SPRING CREEKState  
NVZip Code  
89815-5913FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698491**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLOVER, AVERIL, , ,**

Mailing Address 446 LANCASHIRE RUN

City  
SMITHFIELDState  
NCZip Code  
27577-8029FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696421**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3551 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLOVER, AVERIL, , ,**

Mailing Address 446 LANCASHIRE RUN

City  
SMITHFIELDState  
NCZip Code  
27577-8029FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698043**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOLDMAN, BARBARA, , ,**

Mailing Address 798 N 73RD WEST AVE

City  
TULSAState  
OKZip Code  
74127-5683FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697463**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOODNOW, RUTH, G., MRS.,**

Mailing Address 1452 HESTON PL

City  
CROFTONState  
MDZip Code  
21114-2112FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696458**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3552 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORE, TRINA, , ,**

Mailing Address 14321 SOUTHWEST 20TH STREET

City  
DAVIEState  
FLZip Code  
33325-5426FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696441**

Amount of Each Receipt this Period

30.19

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAHAM, JOSEPH, , ,**

Mailing Address 106 LAKEVIEW LANE

City  
HEADLANDState  
ALZip Code  
36345-2202FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698192**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAINGER, SUSAN, , ,**

Mailing Address P.O. BOX 2898

City  
SANTA MARIAState  
CAZip Code  
93457-2898FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697966**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

143.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3553 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRANT, DAVISON, , ,**

Mailing Address P.O. BOX 26236

City  
AUSTINState  
TXZip Code  
78755-0236FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698457**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREENWOOD, KEITH, , ,**

Mailing Address 1250 S SANDBRANCH

City  
MOUNT HOPEState  
WVZip Code  
25880-9068FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PLUMBER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697467**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREENWOOD, KEITH, , ,**

Mailing Address 1250 S SANDBRANCH

City  
MOUNT HOPEState  
WVZip Code  
25880-9068FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PLUMBER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

580.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698474**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3554 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIFFIN, RICHARD, C., MR.,**

Mailing Address 3457 CHIPMAN RD

City  
EASTONState  
PAZip Code  
18045-3024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BANGOR AREA SCHOOL DISTOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696801**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROGAN, KIMBERLY, , ,**

Mailing Address PO BOX 875

City  
MANHATTAN BEACHState  
CAZip Code  
90267-0875FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696588**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROUND, JIM, , ,**

Mailing Address 9791 E DREYFUS AVE

City  
SCOTTSDALEState  
AZZip Code  
85260-4450FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

937.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697824**

Amount of Each Receipt this Period

38.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

147.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3555 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROVER, KAREN, , ,**

Mailing Address 925 COLORADO ST

City  
MARSEILLESState  
ILZip Code  
61341-1241FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696811

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRUENDEL, LIZ, , ,**

Mailing Address 460 COUNTY ROAD 5170

City  
SALEMState  
MOZip Code  
65560-7302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1090.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698074

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUENTHER, HART, , ,**

Mailing Address 34 CHOWNING DR.

City  
HAMPTONState  
VAZip Code  
23664-1737FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

206.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698569

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

76.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3556 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAAS, RICHARD, , ,**

Mailing Address 318BOCA DEL CANON

City  
SAN CLEMENTEState  
CAZip Code  
92672-5402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697270

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAAS, RICHARD, , ,**

Mailing Address 318BOCA DEL CANON

City  
SAN CLEMENTEState  
CAZip Code  
92672-5402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698281

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAAS, RICHARD, , ,**

Mailing Address 318BOCA DEL CANON

City  
SAN CLEMENTEState  
CAZip Code  
92672-5402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

551.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698291

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

157.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3557 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMAKER, CHARLES, , ,**

Mailing Address 1518 CHESTNUT GROVE LANE

City  
KINGWOODState  
TXZip Code  
77345-1915FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697312

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMMONS, JOYCE, , ,**

Mailing Address 3525 NEW DELHI DR.

City  
WINSTON SALEMState  
NCZip Code  
27101-6211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697868

Amount of Each Receipt this Period

0.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMMONS, JOYCE, , ,**

Mailing Address 3525 NEW DELHI DR.

City  
WINSTON SALEMState  
NCZip Code  
27101-6211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

665.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697869

Amount of Each Receipt this Period

0.20

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3558 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARDIN, JOEL, C., MR.,**

Mailing Address 225 MILL RD

City  
CLEARWATERState  
IDZip Code  
83552-5116FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.32

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698219**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRYMAN, CHARLOTTE, , ,**

Mailing Address 16415 WAGON WHEEL DRIVE

City  
RIVERSIDEState  
CAZip Code  
92506-5849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.50

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696722**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRYMAN, CHARLOTTE, , ,**

Mailing Address 16415 WAGON WHEEL DRIVE

City  
RIVERSIDEState  
CAZip Code  
92506-5849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

421.50

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696725**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3559 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEATHMAN, CHRISTINE, , ,**

Mailing Address 1119 SOUTH SAGE CREEK COURT

City  
HEBER CITYState  
UTZip Code  
84032-4169FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLYMED PLUSOccupation (for Individual)  
FORMULATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1144.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696867**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENLEY, DOY, B., MR.,**

Mailing Address 14251 MIMOSA LANE

City  
TUSTINState  
CAZip Code  
92780-2334FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6843.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697694**

Amount of Each Receipt this Period

950.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERREN, WILLIAM, E., MR.,**

Mailing Address 2201 WOODRIDGE DR

City  
JASPERState  
ALZip Code  
35504-9555FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

246.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696389**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1031.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3560 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HESTER, DON, , ,**

Mailing Address 3981 F. ST.

City  
EUREKAState  
CAZip Code  
95503-6003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697820**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696870**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOAR, NANCY, L., ,**

Mailing Address 73 S UTAH AVE.

City  
NEWARKState  
OHZip Code  
43055-3416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

298.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698095**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3561 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOGG, THERESA, , ,**

Mailing Address 1939 CARRAWAY ST

City  
BIRMINGHAMState  
ALZip Code  
35235-1948FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.25

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697178**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOPKINS, GEORGE, , ,**

Mailing Address 135 CR 2984

City  
HUGHES SPRINGSState  
TXZip Code  
75656-6715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.85

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696614**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

334.95

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698010**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3562 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698019**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUGGINS, TINA, , MS.,**

Mailing Address 3707 WIMBLEDON RD

City  
NASHVILLEState  
TNZip Code  
37215-1819FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696833**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697748**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3563 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697756**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IVERS, DONALD, , MR.,**

Mailing Address 1511 PAUL SPRING PARKWAY

City

ALEXANDRIA

State

VA

Zip Code

22308-1143

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

723.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696508**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACKSON, KEITH, , ,**

Mailing Address 11527 EAST COCHISE DRIVE

City

SCOTTSDALE

State

AZ

Zip Code

85259-4904

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ON SEMICONDUCTOROccupation (for Individual)  
SEMICONDUCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698363**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3564 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JACOBS, JEAN, K., ,

Mailing Address 1141 STEAMBOAT RUN ROAD

City  
SHEPHERDSTOWNState  
WVZip Code  
25443-4132FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696709

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JEANS, JOHN, , ,

Mailing Address 235 INVERNESS CENTER DRIVE  
APT 201City  
BIRMINGHAMState  
ALZip Code  
35242-5606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697566

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOBLIN, NANCY, , ,

Mailing Address 19540 SANDRIDGE WAY

City  
LEESBURGState  
VAZip Code  
20176-8286FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696445

Amount of Each Receipt this Period

14.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

99.62



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3565 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOBLIN, NANCY, , ,**

Mailing Address 19540 SANDRIDGE WAY

City  
LEESBURGState  
VAZip Code  
20176-8286FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696554

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGSState  
IDZip Code  
83276-1671FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696386

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGSState  
IDZip Code  
83276-1671FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

508.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697367

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3566 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON HALL, VALORIE, , ,**

Mailing Address 316 SOUTH COLBORN STREET

City  
IOLAState  
KSZip Code  
66749-3408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ANESTHESIA PROVIDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697172

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON MORTON, VALERIE, , ,**

Mailing Address 3391 EAST ORANGE BLOSSOM WAY

City  
ONTARIOState  
CAZip Code  
91761-3926FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2782.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697629

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, CHARLES, , ,**

Mailing Address 4 LOS ARBOLES CT.

City  
DALLASState  
TXZip Code  
75230-3052FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1486.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697889

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

228.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3567 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, CHARLES, , ,**

Mailing Address 4 LOS ARBOLES CT.

City  
DALLASState  
TXZip Code  
75230-3052FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1486.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697891

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, DORIS, C., MS.,**

Mailing Address 506 BROOKS VILLAGE DR.

City  
PENDERGRASSState  
GAZip Code  
30567-4629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697286

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JUSTO, EDUARDO, A., MR.,**

Mailing Address 2100 NW 82ND AVE

City  
DORALState  
FLZip Code  
33122-1507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698362

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

224.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3568 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KACZMAREK, DEBORAH, , ,**

Mailing Address 2729 SW 124TH TER

City  
OKLAHOMA CITYState  
OKZip Code  
73170-4760FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698244**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAIAFAS, ANDREW, , ,**

Mailing Address 200 BISCQYNE BOULEVARD WAY APT 530

City  
MIAMIState  
FLZip Code  
33131-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MARATHON AIRLINESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

876.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697299**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAMAL, AHMED, , ,**

Mailing Address 40 NUGENT DR.

City  
STAFFORDState  
VAZip Code  
22554-6578FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697034**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

396.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3569 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAMINSKI, BARBARA, , ,**

Mailing Address 214 WATERFORD DR.

City  
EDISONState  
NJZip Code  
08817-1914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697677

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAMINSKI, BARBARA, , ,**

Mailing Address 214 WATERFORD DR.

City  
EDISONState  
NJZip Code  
08817-1914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697678

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696505

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3570 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696507

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696513

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696516

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

50.72

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3571 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696520**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696528**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696533**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

99.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3572 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KANDT, ALICIA, , ,

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696537

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KANDT, ALICIA, , ,

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696538

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KANDT, ALICIA, , ,

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696539

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

88.73



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3573 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696543

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696549

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAUR, JUDITH, , ,**

Mailing Address 26 VILLAGE WALK CT

City  
PONTE VEDRA BEACHState  
FLZip Code  
32082-3542FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696903

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

146.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3574 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEARNS, RICHARD, , ,**

Mailing Address 13576 EAGLE POINTE DR

City  
PORT CHARLOTTEState  
FLZip Code  
33953-4674FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697965**

Amount of Each Receipt this Period

94.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEMMERER, GORDON, PAUL, MR.,**

Mailing Address 422 SE BIRDIE CIR

City  
CEDAREDGEState  
COZip Code  
81413-3851FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

772.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698455**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KIBBY, LEROY, , ,**

Mailing Address 4816 S 154TH PLZ

City  
OMAHAState  
NEZip Code  
68137-5165FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696888**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3575 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KIMBLE, KENNETH, , ,**

Mailing Address 4204 SOUTHPARK DR.

City  
AMARILLOState  
TXZip Code  
79109-5127FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697184

Amount of Each Receipt this Period

130.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIRKLEN, MOLLY, , ,**

Mailing Address 720 SPICER LOOP

City  
KERRVILLEState  
TXZip Code  
78028-8895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
TAX ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696646

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLEE, SHELDON, , MR.,**

Mailing Address 4359 PARK ARROYO

City  
CALABASASState  
CAZip Code  
91302-2806FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ATA CRUISES, INCOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697354

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

234.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3576 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNOLLENBERG, ROBERT, , ,**

Mailing Address 280 CANON VIEW RD

City  
BOULDERState  
COZip Code  
80302-9429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697951

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KORENEK, LAWRENCE, , ,**

Mailing Address 421FRELS

City  
EL CAMPOState  
TXZip Code  
77437-2063FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BANKEROccupation (for Individual)  
LENDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698256

Amount of Each Receipt this Period

0.38

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KORENEK, LAWRENCE, , ,**

Mailing Address 421FRELS

City  
EL CAMPOState  
TXZip Code  
77437-2063FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BANKEROccupation (for Individual)  
LENDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698289

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.38

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3577 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KORZNIECKI, LOU, , ,**

Mailing Address P.O. BOX 308

City  
RONKSState  
PAZip Code  
17572-0308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

616.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698507**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUHN, ROBERT, , ,**

Mailing Address 3718 LANGTRY DR

City  
AMARILLOState  
TXZip Code  
79109-3926FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696879**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KURTI, S., CAROL, ,**

Mailing Address 934 COWEE SCHOOL RD.

City  
FRANKLINState  
NCZip Code  
28734-4524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

408.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697263**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

183.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3578 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KURZET, ANNE, L., MS.,**

Mailing Address 33762 VALLE ROAD

City  
SAN JUAN CAPISTRANState  
CAZip Code  
92675-4816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.30

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697067**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAI, SUE, , ,**

Mailing Address 157 HIDDEN ROAD

City  
ANDOVERState  
MAZip Code  
01810-4933FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

977.55

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698579**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAI, SUE, , ,**

Mailing Address 157 HIDDEN ROAD

City  
ANDOVERState  
MAZip Code  
01810-4933FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

977.55

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698580**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3579 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAI, SUE, , ,

Mailing Address 157 HIDDEN ROAD

City  
ANDOVERState  
MAZip Code  
01810-4933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

977.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698581

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAI, SUE, , ,

Mailing Address 157 HIDDEN ROAD

City  
ANDOVERState  
MAZip Code  
01810-4933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

977.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698582

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAI, SUE, , ,

Mailing Address 157 HIDDEN ROAD

City  
ANDOVERState  
MAZip Code  
01810-4933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

977.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698584

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

134.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3580 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAI, SUE, , ,**

Mailing Address 157 HIDDEN ROAD

City  
ANDOVERState  
MAZip Code  
01810-4933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

977.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698585**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAI, SUE, , ,**

Mailing Address 157 HIDDEN ROAD

City  
ANDOVERState  
MAZip Code  
01810-4933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

977.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698588**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696651**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3581 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697290**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAYO, LEWIS, DANIEL, MR., SR.**

Mailing Address 2316 W VINE ST

City  
LODIState  
CAZip Code  
95242-3727FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
H&R BLOCK TAX GROUPOccupation (for Individual)  
ENROLLED AGENT/TAX PREPARATI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.95

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698550**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEE, JEAN, T., ,**

Mailing Address 814 COLLEGE BLVD.

City  
SAN ANTONIOState  
TXZip Code  
78209-3628FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698523**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3582 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, LINDA, , ,**

Mailing Address PO BOX 647

City  
CARSON CITYState  
NVZip Code  
89702-0647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697464

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEIGH-DARLAND, RYANNE, , ,**Mailing Address 6890 E. SUNRISE DR.  
STE.120-155City  
TUCSONState  
AZZip Code  
85750-0738FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAPSTONE COACHING SERVICESOccupation (for Individual)  
PROFESSIONAL LIFE COACH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696556

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696933

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

198.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3583 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698280

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698433

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LERNER, GLENN, , ,**

Mailing Address 445 EL CAMINO DEL MAR

City  
SAN FRANCISCOState  
CAZip Code  
94121-1039FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698159

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3584 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LERNER, GLENN, , ,**

Mailing Address 445 EL CAMINO DEL MAR

City  
SAN FRANCISCOState  
CAZip Code  
94121-1039FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.27

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698162**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LERNER, GLENN, , ,**

Mailing Address 445 EL CAMINO DEL MAR

City  
SAN FRANCISCOState  
CAZip Code  
94121-1039FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.27

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698164**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LERNER, GLENN, , ,**

Mailing Address 445 EL CAMINO DEL MAR

City  
SAN FRANCISCOState  
CAZip Code  
94121-1039FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.27

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698167**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3585 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LERNER, GLENN, , ,**

Mailing Address 445 EL CAMINO DEL MAR

City  
SAN FRANCISCOState  
CAZip Code  
94121-1039FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698170**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEWAKOWSKI, THOMAS, , ,**

Mailing Address 10878 CHANNELSIDE DR

City  
GULFPORTState  
MSZip Code  
39503-6066FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RED SEA GLOBAL

Occupation (for Individual)

ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698547**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEYSHON, DAVID, W., MR.,**

Mailing Address 1608 HONEYSUCKLE CT

City  
WEST CHESTERState  
PAZip Code  
19380-4361FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

WALMART

Occupation (for Individual)

SHELF STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

703.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698393**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3586 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIKES, KATHY, , ,**

Mailing Address 3184 RESERVOIR DR.

City  
SIMI VALLEYState  
CAZip Code  
93065-1014FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697515**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LONG, LAURIE, , ,**

Mailing Address 103 EAST CHEYENNE ROAD

City  
COLORADO SPRINGSState  
COZip Code  
80906-2533FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696586**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUDEMAN, ROGER, , ,**

Mailing Address 2291 W PARK AVE

City  
CHANDLERState  
AZZip Code  
85224-4035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

488.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698529**

Amount of Each Receipt this Period

83.28

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

286.38

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3587 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697138**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698353**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUTSCHG, VIVIAN, , MRS.,**

Mailing Address 2400 MAPLE ST.

City  
CHADRONState  
NEZip Code  
69337-9369FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.80

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698520**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3588 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACEYKO, ROBERT, , ,**

Mailing Address 45 HIGHLAND AVE

City  
WALDENState  
NYZip Code  
12586-1429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BERNIES BUS SERVICE INC.Occupation (for Individual)  
SCHOOL BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.57

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697919**

Amount of Each Receipt this Period

9.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MADDEN, STEVE, , ,**

Mailing Address 16890 NORTH RIVER SHORES ROAD

City  
NORTHPORTState  
ALZip Code  
35475-2519FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.30

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697658**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAEKAWA, YOSHIMITSU, , ,**

Mailing Address 2349 123RD STREET

City  
COLLEGE POINTState  
NYZip Code  
11356-2639FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

452.56

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697106**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3589 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAEKAWA, YOSHIMITSU, , ,**

Mailing Address 2349 123RD STREET

City  
COLLEGE POINTState  
NYZip Code  
11356-2639FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

**Transaction ID : SA11A.27697108**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAEKAWA, YOSHIMITSU, , ,**

Mailing Address 2349 123RD STREET

City  
COLLEGE POINTState  
NYZip Code  
11356-2639FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

**Transaction ID : SA11A.27697109**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAEKAWA, YOSHIMITSU, , ,**

Mailing Address 2349 123RD STREET

City  
COLLEGE POINTState  
NYZip Code  
11356-2639FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

452.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

**Transaction ID : SA11A.27697112**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3590 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAKOWSKI, RICHARD, , ,**

Mailing Address 701 SPANISH MAIN DR. #325

City  
CUDJOE KEYState  
FLZip Code  
33042-4352FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696380**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANN, CATHY, C., MISS,**

Mailing Address 6101 S 25TH ST.

City  
LINCOLNState  
NEZip Code  
68512-2010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698081**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANN, GERALD, D., MR., II**

Mailing Address 8102 BAYBERRY CT

City  
INDIANAPOLISState  
INZip Code  
46250-1629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MANN PROPERTY LLPOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

752.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696693**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

335.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3591 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697421**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANSOUR, ALFRED, A., DR.,**

Mailing Address 3771 BELLAIRE BLVD

City  
HOUSTONState  
TXZip Code  
77025-1206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ACCESS RADIOLOGYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696400**

Amount of Each Receipt this Period

17.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANSOUR, ALFRED, A., DR.,**

Mailing Address 3771 BELLAIRE BLVD

City  
HOUSTONState  
TXZip Code  
77025-1206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ACCESS RADIOLOGYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

847.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696402**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3592 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARKOVIC, ILIJA, M., MR.,**

Mailing Address 11187 E OBERLIN WAY

City  
SCOTTSDALEState  
AZZip Code  
85262-7416FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696925**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTENS, JIM, , ,**

Mailing Address 6634 BUDDY MILLER DRIVE

City  
ALVATONState  
KYZip Code  
42122-9610FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698352**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASESSA, ROBERT, , ,**

Mailing Address 1524 STATE RT 23

City  
BUTLERState  
NJZip Code  
07405-1829FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MASESSA AND CLUFFOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698310**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

223.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3593 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697710**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697918**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATHEWS, TIMOTHY, , ,**

Mailing Address 388 PALOMARES AVENUE

City  
VENTURAState  
CAZip Code  
93003-1737FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

727.38

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697762**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3594 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATTHEWS, ANNETTA, , ,**

Mailing Address 100 SAGART LN

City  
NICHOLASVILLEState  
KYZip Code  
40356-9735FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

884.86

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697015**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATTHEWS, ANNETTA, , ,**

Mailing Address 100 SAGART LN

City  
NICHOLASVILLEState  
KYZip Code  
40356-9735FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

884.86

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697022**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCAULIFFE, JOHN, , ,**

Mailing Address 5 WEBSTER RD

City  
SOMERSETState  
NJZip Code  
08873-2214FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698311**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.20

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3595 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCCARTHY, DAVID, , ,

Mailing Address 15117 PINION CT.

City  
BAKERSFIELDState  
CAZip Code  
93314-8199FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698233

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCGINNIS, SCOTT, , ,

Mailing Address 45A POPPY LOOP LANE

City  
JASPERState  
ALZip Code  
35504-0007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696379

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCHUGH, LAURENCE, , ,

Mailing Address 25 INDIAN TRL

City  
CHARLESTOWNState  
RIZip Code  
02813-3133FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696771

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

752.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3596 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCNAMARA, PATRICK, , ,**

Mailing Address 4750 W PASEO DE LAS COLINAS

City  
TUCSONState  
AZZip Code  
85745-9240FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TRETCHOK MCNAMARA & MILLEROccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697241**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCPHEARSON, FORREST, , ,**

Mailing Address 71178 CLIPPER PL

City  
ABITA SPRINGSState  
LAZip Code  
70420-3466FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698249**

Amount of Each Receipt this Period

18.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEEHAN, JOAN, , ,**

Mailing Address 2874 GOLDEN GATE AVE

City  
SAN FRANCISCOState  
CAZip Code  
94118-4111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1962.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696906**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

167.42



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3597 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MERIWETHER, NORMA, C., MS.,**

Mailing Address 28 LOST POND

City  
NELLYSFORDState  
VAZip Code  
22958-8004FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698387

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MERTZ, PAUL, , MR.,**

Mailing Address 5 GALE AVE

City  
RIVER FORESTState  
ILZip Code  
60305-2009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696377

Amount of Each Receipt this Period

470.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEYERS-GLYDA, DONNA, , MS.,**

Mailing Address 7512 VALHALLA DRIVE

City  
MAUMEEState  
OHZip Code  
43537-9512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SERENITY REALTYOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697669

Amount of Each Receipt this Period

1.07

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

481.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3598 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEYERS-GLYDA, DONNA, , MS.,**

Mailing Address 7512 VALHALLA DRIVE

City  
MAUMEEState  
OHZip Code  
43537-9512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SERENITY REALTYOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.74

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697794**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MICHELI, JAMES, , ,**

Mailing Address 879 ROBERT TREAT EXT

City  
ORANGEState  
CTZip Code  
06477-1649FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696717**

Amount of Each Receipt this Period

205.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MICKESH, MARK, , ,**

Mailing Address 264 CORAL STREET

City  
LONG BEACHState  
CAZip Code  
90810-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MARK MICKESHOccupation (for Individual)  
MRI YECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697122**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

457.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3599 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, ANNE, , ,**

Mailing Address 6 RONNA RD

City  
GLOUCESTERState  
MAZip Code  
01930-1665FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1006.86

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696703**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, JANE, R., MRS.,**

Mailing Address 1279 PEACHTREE BATTLE AVE. NW

City  
ATLANTAState  
GAZip Code  
30327-1443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697152**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.16

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698434**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3600 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIXON, DWIGHT, , ,**

Mailing Address 1324 ATHENS ROAD

City  
CRAWFORDState  
GAZip Code  
30630-2516FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697201**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698372**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOORCROFT, GARY, , ,**

Mailing Address P.O. BOX 1708

City  
OLDSMARState  
FLZip Code  
34677-1708FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.88

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697729**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3601 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORGAN, DAVID, G., ,**Mailing Address 4412 ISLAND PLACE  
104City  
ANNANDALEState  
VAZip Code  
22003-4885FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697394**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORRICAL, PATRICIA, K., ,**

Mailing Address 5682 COUNTRY LAKES DR

City  
SARASOTAState  
FLZip Code  
34243-3811FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697827**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698044**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3602 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698046

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698049

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698052

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3603 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698054

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698058

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698059

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

119.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3604 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698064

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698067

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698070

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3605 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698071

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MULLER, DONNA, , MS.,**

Mailing Address 295 JUDD RD

City  
MILANState  
MIZip Code  
48160-9585FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697872

Amount of Each Receipt this Period

94.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUNSCHAUER, LYMAN, , MR.,**

Mailing Address 449 19TH ST NE

City  
WASHINGTONState  
DCZip Code  
20002-4701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TARGETED VICTORYOccupation (for Individual)  
SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698389

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5141.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3606 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NASH, JANIS, , ,**

Mailing Address 2207 E 11620 S

City  
SANDYState  
UTZip Code  
84092-5668FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697097

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEAT, KAREN, , ,**

Mailing Address 2002 APPLESEED DR

City  
ALLENState  
TXZip Code  
75013-4894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698034

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEAT, KAREN, , ,**

Mailing Address 2002 APPLESEED DR

City  
ALLENState  
TXZip Code  
75013-4894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

816.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698047

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

116.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3607 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEAT, KAREN, , ,**

Mailing Address 2002 APPLESEED DR

City  
ALLENState  
TXZip Code  
75013-4894FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698066**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEAT, KAREN, , ,**

Mailing Address 2002 APPLESEED DR

City  
ALLENState  
TXZip Code  
75013-4894FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698078**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSEN, GENE, , ,**

Mailing Address 9524 WICKHAM DRIVE

City  
JOHNSTONState  
IAZip Code  
50131-3074FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NELSEN APPRAISALOccupation (for Individual)  
APPRAISAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697709**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

173.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3608 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, PAUL, , ,**

Mailing Address 6803 NORTH 68TH PLAZA

City  
OMAHAState  
NEZip Code  
68152-2177FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697344**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIENTKE, STEVE, , ,**

Mailing Address 1374 N RIDGE RD

City  
PECKState  
KSZip Code  
67120-9039FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698110**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'FLYNN, ARMINDA, , ,**

Mailing Address 12864 BISCAYNE BLVD

City  
N. MIAMIState  
FLZip Code  
33181-2007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

992.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697374**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.53

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3609 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OAK, ALAN, , MR.,**

Mailing Address 5104 BONHAM RD

City  
OXFORD

State  
OH

Zip Code  
45056-3606

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.83

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

**Transaction ID : SA11A.27696632**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ODOM, TAMELA, , ,**

Mailing Address 403 SANFORD ROAD

City  
ANDALUSIA

State  
AL

Zip Code  
36420-4121

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.98

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

**Transaction ID : SA11A.27697208**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ODOM, TAMELA, , ,**

Mailing Address 403 SANFORD ROAD

City  
ANDALUSIA

State  
AL

Zip Code  
36420-4121

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.98

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

**Transaction ID : SA11A.27697238**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

116.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3610 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ODUM, FREIDA, L., MS.,**

Mailing Address 1136 DEAN FOREST RD

City  
SAVANNAHState  
GAZip Code  
31405-9304FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697160**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, PATRICIA, , ,**

Mailing Address 243 OCEANO DRIVE

City  
LOS ANGELESState  
CAZip Code  
90049-4123FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697534**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PACE, EDWARD, , ,**

Mailing Address 9412 CRESCENT BAR RD

City  
QUINCYState  
WAZip Code  
98848-9121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

372.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697489**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3611 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PACE, EDWARD, , ,**

Mailing Address 9412 CRESCENT BAR RD

City  
QUINCYState  
WAZip Code  
98848-9121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697598**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PALAZA, MADELEINE, , ,**

Mailing Address 69 KING ST.

City  
STOUGHTONState  
MAZip Code  
02072-3820FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696481**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKER, BRUCE, E., ,**

Mailing Address 320 IVYWOOD LANE

City  
NAPLESState  
FLZip Code  
34112-7239FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697284**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3612 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARKER, BRUCE, E., ,**

Mailing Address 320 IVYWOOD LANE

City  
NAPLESState  
FLZip Code  
34112-7239FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698465

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARKER, BRUCE, E., ,**

Mailing Address 320 IVYWOOD LANE

City  
NAPLESState  
FLZip Code  
34112-7239FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698477

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PATTERSON, BARBARA, , ,**

Mailing Address 2700 SUNRUNNER LANE

City  
GULF BREEZEState  
FLZip Code  
32563-2562FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

935.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697049

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.43



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3613 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PATTERSON, BARBARA, , ,**

Mailing Address 2700 SUNRUNNER LANE

City  
GULF BREEZE

State  
FL

Zip Code  
32563-2562

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

**Transaction ID : SA11A.27697059**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAULSON, KATHLEEN, , ,**

Mailing Address 7725 E SANDALWOOD

City  
SCOTTSDALE

State  
AZ

Zip Code  
85250-7732

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

**Transaction ID : SA11A.27696455**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAULSON, KATHLEEN, , ,**

Mailing Address 7725 E SANDALWOOD

City  
SCOTTSDALE

State  
AZ

Zip Code  
85250-7732

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

**Transaction ID : SA11A.27696465**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

109.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3614 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAULSON, KATHLEEN, , ,**

Mailing Address 7725 E SANDALWOOD

City  
SCOTTSDALEState  
AZZip Code  
85250-7732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698144**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, EDWIN, , ,**

Mailing Address 2061 SE ACADEMY ST

City  
DALLASState  
ORZip Code  
97338-1965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696882**

Amount of Each Receipt this Period

12.72

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, EDWIN, , ,**

Mailing Address 2061 SE ACADEMY ST

City  
DALLASState  
ORZip Code  
97338-1965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696957**

Amount of Each Receipt this Period

23.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3615 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, JOHN, B., MR.,**

Mailing Address 9900 NE 114 TH CIRCLE

City  
VANCOUVERState  
WAZip Code  
98662-1588FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VSNA, LLCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696695**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRY, KATHY, , ,**

Mailing Address 9724.CREEGER RD

City  
TUCSONState  
AZZip Code  
85756-8847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DBMP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.80

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696699**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERSON, DEBRA, , ,**

Mailing Address 2545 N 83RD AVE APT 2016

City  
PHOENIXState  
AZZip Code  
85035-2430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FESDOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697406**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

251.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3616 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETERS, ELLIE, , ,**

Mailing Address 302 US HWY 385 NORTH

City  
SEMINOLEState  
TXZip Code  
79360-7119FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARM RANCH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698366**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETRITZ, GEORGE, L., ,**

Mailing Address 4811 ROGERS ROAD

City  
BEULAHState  
MIZip Code  
49617-9562FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696410**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETRITZ, GEORGE, L., ,**

Mailing Address 4811 ROGERS ROAD

City  
BEULAHState  
MIZip Code  
49617-9562FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698030**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3617 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697962**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697963**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PHILLIPS, KAREN, , ,**

Mailing Address 13888 STATE ROAD 32 EAST

City  
NOBLESVILLEState  
INZip Code  
46060-8858FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

680.35

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698109**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3618 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696407

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696462

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696558

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3619 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PISTORINO, MARIA, , MS.,**

Mailing Address 6535 SW 123RD STREET

City  
PINECRESTState  
FLZip Code  
33156-5554FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

983.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

**Transaction ID : SA11A.27697792**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PLOWMAN, HARLAN, A., MR.,**

Mailing Address 1062 7TH ST

City  
GLEN BURNIEState  
MDZip Code  
21060-6758FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

**Transaction ID : SA11A.27698314**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POWELL, DOUG, , ,**

Mailing Address 14461 BROOK HOLLOW RD

City  
SUMMERDALEState  
ALZip Code  
36580-4211FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

237.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

**Transaction ID : SA11A.27698216**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3620 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PROCTOR, DAVID, R., ,**

Mailing Address 8301 N CENTRAL EXPY

City  
DALLASState  
TXZip Code  
75225-4409FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697484

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAGLAND, ELOISE, , MS.,**

Mailing Address 1815 SHERRY LEA DR.

City  
NEOSHOState  
MOZip Code  
64850-2930FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RAGLAND MILLS INCORPORATEDOccupation (for Individual)  
PRESIDENT OF COMPANY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698274

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAGLAND, ELOISE, , MS.,**

Mailing Address 1815 SHERRY LEA DR.

City  
NEOSHOState  
MOZip Code  
64850-2930FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RAGLAND MILLS INCORPORATEDOccupation (for Individual)  
PRESIDENT OF COMPANY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

663.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698290

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

1020.50

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3621 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RANSOM, JAMES, H., DR.,**

Mailing Address 319 WOODLAND RD.

City  
SEWICKLEYState  
PAZip Code  
15143-1048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696453**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698344**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698345**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

42.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3622 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698347**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698350**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698354**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3623 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** REAVIS, ROY, , ,

Mailing Address 205 RUE SAINT BARTS

City  
YOUNGSVILLEState  
LAZip Code  
70592-5525FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698234

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** REAVIS, ROY, , ,

Mailing Address 205 RUE SAINT BARTS

City  
YOUNGSVILLEState  
LAZip Code  
70592-5525FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698238

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** REAVIS, ROY, , ,

Mailing Address 205 RUE SAINT BARTS

City  
YOUNGSVILLEState  
LAZip Code  
70592-5525FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

430.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698239

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3624 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REAVIS, ROY, , ,

Mailing Address 205 RUE SAINT BARTS

City  
YOUNGSVILLEState  
LAZip Code  
70592-5525FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698241

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REAVIS, ROY, , ,

Mailing Address 205 RUE SAINT BARTS

City  
YOUNGSVILLEState  
LAZip Code  
70592-5525FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698243

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REAVIS, ROY, , ,

Mailing Address 205 RUE SAINT BARTS

City  
YOUNGSVILLEState  
LAZip Code  
70592-5525FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

430.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698245

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3625 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REAVIS, ROY, , ,**

Mailing Address 205 RUE SAINT BARTS

City  
YOUNGSVILLEState  
LAZip Code  
70592-5525FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698247

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REAVIS, ROY, , ,**

Mailing Address 205 RUE SAINT BARTS

City  
YOUNGSVILLEState  
LAZip Code  
70592-5525FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698251

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REEVES, DONALD, E., MR.,**

Mailing Address 230 8TH ST

City  
SEAL BEACHState  
CAZip Code  
90740-6306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698578

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3626 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REEVES, LESLEY, , ,**

Mailing Address 278 E PAUL DR.

City  
PAYSONState  
AZZip Code  
85541-2445FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698534**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REISS, CLAIRE, K., MRS.,**Mailing Address 464 PROSPECT STREET  
UNIT 501City  
LA JOLLAState  
CAZip Code  
92037-4742FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1431.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697084**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REISS, CLAIRE, K., MRS.,**Mailing Address 464 PROSPECT STREET  
UNIT 501City  
LA JOLLAState  
CAZip Code  
92037-4742FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1431.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697092**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3627 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RENTOF, PETER, , ,**Mailing Address 235 EAST 22ND STREET  
7DCity  
NEW YORKState  
NYZip Code  
10010-4635FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.33

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696372**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIBANDO, JOHN, , ,**

Mailing Address 1950 WILLOW RUN BLVD

City  
LEMARSState  
IAZip Code  
51031-8698FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697731**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICCIUTI, LOU RAE, , ,**

Mailing Address 12107 KAMMERER AVENUE

City  
CONNEAUT LAKEState  
PAZip Code  
16316-3941FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696583**

Amount of Each Receipt this Period

9.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3628 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, EUGENE, , ,**

Mailing Address 4766 E 18TH STREET

City  
TUCSONState  
AZZip Code  
85711-4359FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696358

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBY, JUDD, , ,**

Mailing Address 5048 TUXEDO BLVD

City  
MOUNDState  
MNZip Code  
55364-9254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696436

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBY, JUDD, , ,**

Mailing Address 5048 TUXEDO BLVD

City  
MOUNDState  
MNZip Code  
55364-9254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

369.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696440

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

163.80



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3629 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROONEY, RANDALL, , ,**

Mailing Address 101 ONEILL CT

City  
FOLSOMState  
CAZip Code  
95630-2379FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696978**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROWE, GARRY, , ,**

Mailing Address 6650 EVENING ST

City  
COLUMBUSState  
OHZip Code  
43085-2487FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697592**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696429**

Amount of Each Receipt this Period

0.28

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.72

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3630 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RUBEL, DIANE, , ,

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696733

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUBEL, DIANE, , ,

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697935

Amount of Each Receipt this Period

1.56

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUDEGEAIR, FRANCIS, X., ,

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698260

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

37.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3631 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698343

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSHMAN, ROGER, , ,**

Mailing Address 1730 MILLWOOD WAY

City  
THE VILLAGESState  
FLZip Code  
32162-1674FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697317

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696378

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3632 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SALCEDO, JOSEPH, , ,**

Mailing Address PO BOX 876624

City  
WASILLAState  
AKZip Code  
99687-6624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOWE'SOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697137

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697219

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697220

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.54

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3633 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOOD

State  
AL

Zip Code  
36034-3204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

**Transaction ID : SA11A.27697223**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOOD

State  
AL

Zip Code  
36034-3204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

**Transaction ID : SA11A.27697230**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOOD

State  
AL

Zip Code  
36034-3204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

**Transaction ID : SA11A.27697233**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

79.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3634 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

**Transaction ID : SA11A.27697246**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANTORO, NANCY, , ,**

Mailing Address P.O. BOX 2095

City  
RANCHO SANTA FEState  
CAZip Code  
92067-2095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1476.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

**Transaction ID : SA11A.27697146**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANTORO, NANCY, , ,**

Mailing Address P.O. BOX 2095

City  
RANCHO SANTA FEState  
CAZip Code  
92067-2095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1476.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

**Transaction ID : SA11A.27697150**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3635 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANTORO, NANCY, , ,**

Mailing Address P.O. BOX 2095

City  
RANCHO SANTA FEState  
CAZip Code  
92067-2095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1476.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697151**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SARBA, BARRY, , ,**

Mailing Address 435 BATTLE DR.

City  
FANNINState  
TXZip Code  
77960-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696781**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAULS, HARRIETT, , ,**

Mailing Address 2606 YATES AVE

City  
PENSACOLAState  
FLZip Code  
32503-4982FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697453**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

209.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3636 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

Transaction ID : SA11A.27697471

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHLOUGH, JAMES, , ,**

Mailing Address 3810 CHURCH HILL

City  
CRYSTAL LAKEState  
ILZip Code  
60014-6511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.20

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

Transaction ID : SA11A.27698380

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHWIETERMAN, DALE, , ,**

Mailing Address 3924 COUNTY ROAD 716A

City  
CELINAState  
OHZip Code  
45822-8121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

326.43

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025

Transaction ID : SA11A.27696547

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.93



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3637 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, ALAN, , ,**

Mailing Address 5655 E MISTIC BAY BLVD

City  
MARBLEHEADState  
OHZip Code  
43440-9684FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698452**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, JOHN, , ,**

Mailing Address 8012 FIELDSTONE AVENUE NW

City  
ALBUQUERQUEState  
NMZip Code  
87120-8030FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697681**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SERBIA, VICTORIA, C., ,**

Mailing Address 4304 HORACE DR. NW

City  
HUNTSVILLEState  
ALZip Code  
35816-3518FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697391**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3638 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEWARD, JESSIE, M., DR.,**

Mailing Address 2231 ROBINSON RD NE STE200

City  
MARIETTAState  
GAZip Code  
30068-2289FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698017

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHALLER, NELSON, , ,**

Mailing Address 17898 ABERDEEN WAY

City  
BOCA RATONState  
FLZip Code  
33496-1411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2568.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698264

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHANK, NATHAN, , ,**

Mailing Address 2065 MOUND HILL ROAD

City  
DIXONState  
ILZip Code  
61021-9743FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697170

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

218.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3639 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHELTON, SHARON, K., MRS.,**

Mailing Address 9692 LONGMONT DRIVE

City  
HOUSTONState  
TXZip Code  
77063-1029FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697279**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOOP, BEV, , ,**

Mailing Address 843 N. WOODLAWN AVE.

City  
KIRKWOODState  
MOZip Code  
63122-2949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698367**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIMPSON, BARBRA, , ,**

Mailing Address 872 5TH STREET

City  
MANHATTAN BEACHState  
CAZip Code  
90266-6664FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698039**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3640 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINTIM-DAMOA, KWABENA, , ,**

Mailing Address 30 EMPRESS CT

City  
FREEHOLDState  
NJZip Code  
07728-4304FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696793**

Amount of Each Receipt this Period

37.48

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SINTIM-DAMOA, KWABENA, , ,**

Mailing Address 30 EMPRESS CT

City  
FREEHOLDState  
NJZip Code  
07728-4304FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697265**

Amount of Each Receipt this Period

37.48

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIWIK, DEBORAH, , ,**

Mailing Address 1750 5TH STREET DR. NW

City  
HICKORYState  
NCZip Code  
28601-5206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

482.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696768**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.17

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3641 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SKIBINSKI, DAVID, , ,**

Mailing Address 36 GLACIER DR.

City  
MORRIS PLAINSState  
NJZip Code  
07950-2748FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PFIZEROccupation (for Individual)  
COMPUTER SYSTEMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698423

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696992

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696994

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

151.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3642 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696995**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696997**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696999**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.17

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3643 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697001

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697003

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697005

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3644 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697006

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697008

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697018

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.19



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3645 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, KELLY, , ,**

Mailing Address 5800 GRASSMERE LANE

City  
DALLASState  
TXZip Code  
75205-4624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698187

Amount of Each Receipt this Period

7.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, MICHAEL, A., MR.,**

Mailing Address P.O. BOX 971

City  
MIDDLEBURGState  
VAZip Code  
20118-0971FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VALLEY PROTEINS, INC.Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8274.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698360

Amount of Each Receipt this Period

475.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697068

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

492.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3646 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698220

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696894

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698572

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3647 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNOWDEN, JAMES, , MR., III**

Mailing Address 4033 TAMWORTH RD

City  
FORT WORTHState  
TXZip Code  
76116-7337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1694.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697376**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697726**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPAETH, EDMUND, , ,**

Mailing Address 26536 LOVE LN

City  
RAMONAState  
CAZip Code  
92065-4822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

499.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698576**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3648 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STAUDER, TIMOTHY, D., MR.,**

Mailing Address 8 MAJESTIC DR.

City  
DIX HILLSState  
NYZip Code  
11746-4859FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CJ QUALITY DISTRIBUTORSOccupation (for Individual)  
WHOLESALE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.30

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697004**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STONER, BEVERLY, , ,**

Mailing Address 624 E PRAIRIE ST.

City  
LANARKState  
ILZip Code  
61046-1340FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.30

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697380**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRAWBRIDGE, ROBERT, ALLEN, MR.,**

Mailing Address 120 VISION PARK BLVD 143

City  
CONROEState  
TXZip Code  
77384-3022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

656.28

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697016**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3649 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STURGILL, LARRY, , ,**

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696649

Amount of Each Receipt this Period

0.38

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STURTEVANT, STEPHANIE, , ,**

Mailing Address 11 PRICE DRIVE

City  
TROYState  
ILZip Code  
62294-3221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NGAOccupation (for Individual)  
DOD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697351

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TALLEY, RICHARD, , ,**Mailing Address 2777 PARADISE RD  
3606City  
LAS VEGASState  
NVZip Code  
89109-9126FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697462

Amount of Each Receipt this Period

7.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3650 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, BILLY, , ,**

Mailing Address P O BOX 1346

City  
MONTGOMERYState  
TXZip Code  
77356-1346FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696746

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, BILLY, , ,**

Mailing Address P O BOX 1346

City  
MONTGOMERYState  
TXZip Code  
77356-1346FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698428

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, WILLIAM, , MR.,**

Mailing Address 204 MANDALAY

City  
SAN MARCOSState  
TXZip Code  
78666-3631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696470

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

45.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3651 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THORNE, MIKELL, , ,**

Mailing Address POBOX 19283

City  
INDIANAPOLISState  
INZip Code  
46219-0283FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696688**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THORNE, MIKELL, , ,**

Mailing Address POBOX 19283

City  
INDIANAPOLISState  
INZip Code  
46219-0283FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696689**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THORNE, MIKELL, , ,**

Mailing Address POBOX 19283

City  
INDIANAPOLISState  
INZip Code  
46219-0283FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696690**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3652 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THORNE, MIKELL, , ,**

Mailing Address POBOX 19283

City  
INDIANAPOLISState  
INZip Code  
46219-0283FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696692

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THORNE, MIKELL, , ,**

Mailing Address POBOX 19283

City  
INDIANAPOLISState  
INZip Code  
46219-0283FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696694

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THORNE, MIKELL, , ,**

Mailing Address POBOX 19283

City  
INDIANAPOLISState  
INZip Code  
46219-0283FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696698

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

74.80



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3653 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THORNE, MIKELL, , ,**

Mailing Address POBOX 19283

City  
INDIANAPOLISState  
INZip Code  
46219-0283FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696700

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THORNE, MIKELL, , ,**

Mailing Address POBOX 19283

City  
INDIANAPOLISState  
INZip Code  
46219-0283FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696705

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THORNE, MIKELL, , ,**

Mailing Address POBOX 19283

City  
INDIANAPOLISState  
INZip Code  
46219-0283FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696707

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

74.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3654 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THORNE, MIKELL, , ,**

Mailing Address POBOX 19283

City  
INDIANAPOLISState  
INZip Code  
46219-0283FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.03

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696712**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THRASHER, MICHAEL, , ,**

Mailing Address 153 COVENTRY LAKE DRIVE

City  
LEXINGTONState  
SCZip Code  
29072-2761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GUARDIAN FENCE, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.67

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698299**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THRASHER, MICHAEL, , ,**

Mailing Address 153 COVENTRY LAKE DRIVE

City  
LEXINGTONState  
SCZip Code  
29072-2761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GUARDIAN FENCE, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

945.67

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698300**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3655 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THRASHER, MICHAEL, , ,**

Mailing Address 153 COVENTRY LAKE DRIVE

City  
LEXINGTONState  
SCZip Code  
29072-2761FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GUARDIAN FENCE, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698301

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THRASHER, MICHAEL, , ,**

Mailing Address 153 COVENTRY LAKE DRIVE

City  
LEXINGTONState  
SCZip Code  
29072-2761FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GUARDIAN FENCE, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698305

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THRASHER, MICHAEL, , ,**

Mailing Address 153 COVENTRY LAKE DRIVE

City  
LEXINGTONState  
SCZip Code  
29072-2761FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GUARDIAN FENCE, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

945.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698308

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3656 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TILMA, TEE, , ,**

Mailing Address 406 ROCKHILL DR.

City  
SAN ANTONIOState  
TXZip Code  
78209-2317FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696773

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TOBEN, DENNIS, , ,**

Mailing Address 19501 40TH AVENUE WEST #545

City  
LYNNWOODState  
WAZip Code  
98036-5799FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698139

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697822

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

178.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3657 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697826

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697828

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697832

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3658 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697835

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697836

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697837

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3659 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697839**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRAVELSTEAD, CHARLES, , ,**

Mailing Address 6524 LOWELL ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-6808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BEAR RIVER ENERGYOccupation (for Individual)  
CEO CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697848**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TUCKER, BRYAN, , MR.,**

Mailing Address P.O. BOX 84519

City  
PEARLANDState  
TXZip Code  
77584-0011FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ONLINE DIRECTIONALOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697535**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.19



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3660 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TULLAI, SARAH, L., MRS.,**

Mailing Address 14900 W GOLDWATER RIDGE DR.

City  
SURPRISEState  
AZZip Code  
85374-9551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.85

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697180**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TURPIN, JON, F., ,**

Mailing Address 2421 S PLUM ST

City  
YORKTOWNState  
INZip Code  
47396-1513FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.03

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696484**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TURPIN, JON, F., ,**

Mailing Address 2421 S PLUM ST

City  
YORKTOWNState  
INZip Code  
47396-1513FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

353.03

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696487**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.47



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3661 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TYPER, DONALD, R., MR.,**

Mailing Address 410 N WEAVER ST

City  
HESSTONState  
KSZip Code  
67062-9041FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLC REALESTATE SERVICESOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696813**

Amount of Each Receipt this Period

12.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. UNDERWOOD, BARBARA, , ,**

Mailing Address 700 CRESTVIEW DRIVE

City  
WOOD RIVERState  
ILZip Code  
62095-3378FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697980**

Amount of Each Receipt this Period

70.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAUGHAN, THOMAS, , ,**

Mailing Address 70 EAST BROOKE STREET

City  
JACKSONState  
MSZip Code  
39216-4714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

915.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697420**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.42

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3662 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAUGHAN, THOMAS, , ,**

Mailing Address 70 EAST BROOKE STREET

City  
JACKSONState  
MSZip Code  
39216-4714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697517

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAUGHAN, THOMAS, , ,**

Mailing Address 70 EAST BROOKE STREET

City  
JACKSONState  
MSZip Code  
39216-4714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697520

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAUGHAN, THOMAS, , ,**

Mailing Address 70 EAST BROOKE STREET

City  
JACKSONState  
MSZip Code  
39216-4714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

915.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697523

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

128.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3663 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAUGHAN, THOMAS, , ,**

Mailing Address 70 EAST BROOKE STREET

City  
JACKSONState  
MSZip Code  
39216-4714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697526

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAUGHAN, THOMAS, , ,**

Mailing Address 70 EAST BROOKE STREET

City  
JACKSONState  
MSZip Code  
39216-4714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697531

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAUGHAN, THOMAS, , ,**

Mailing Address 70 EAST BROOKE STREET

City  
JACKSONState  
MSZip Code  
39216-4714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

915.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697532

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3664 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VAUGHAN, THOMAS, , ,

Mailing Address 70 EAST BROOKE STREET

City  
JACKSONState  
MSZip Code  
39216-4714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697536

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VAUGHAN, THOMAS, , ,

Mailing Address 70 EAST BROOKE STREET

City  
JACKSONState  
MSZip Code  
39216-4714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697537

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VAUGHAN, THOMAS, , ,

Mailing Address 70 EAST BROOKE STREET

City  
JACKSONState  
MSZip Code  
39216-4714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

915.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697543

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3665 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAUGHAN, THOMAS, , ,**

Mailing Address 70 EAST BROOKE STREET

City  
JACKSONState  
MSZip Code  
39216-4714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697624

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAWTER, STEVE, , ,**

Mailing Address 1701 CATALINA AVE

City  
SEAL BEACHState  
CAZip Code  
90740-5710FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698495

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VICAIN, LES, , ,**

Mailing Address 16102 CAPRI DR.

City  
JERSEY VILLAGEState  
TXZip Code  
77040-1207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697925

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3666 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VICAIN, LES, , ,**

Mailing Address 16102 CAPRI DR.

City  
JERSEY VILLAGEState  
TXZip Code  
77040-1207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697933

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VILLANUEVA, SALVADOR, , ,**

Mailing Address 215 ROBINHOOD DR.

City  
JUNCTION CITYState  
KSZip Code  
66441-9773FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696961

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VILLANUEVA, SALVADOR, , ,**

Mailing Address 215 ROBINHOOD DR.

City  
JUNCTION CITYState  
KSZip Code  
66441-9773FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

292.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697711

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3667 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VLIET, KIRSTEN, , ,

Mailing Address 3300 BEE CAVE RD

City  
WEST LAKE HILLSState  
TXZip Code  
78746-6600FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BICOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696480

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VO, HONG, , ,

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698027

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VO, HONG, , ,

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27698121

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3668 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698320**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WADHAM, THOMAS, A., ,**

Mailing Address 600 FOREST GROVE AVE

City  
DAYTONState  
OHZip Code  
45406-4434FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698514**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALKER, CAROLYN, , ,**

Mailing Address 22570 GREEN MOUNT PLACE

City  
YORBA LINDAState  
CAZip Code  
92887-2740FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

374.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697336**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.92



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3669 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALKER, LUCINDA, , ,**

Mailing Address 67 IRVING AVENUE, P.O. BOX 507

City  
HYANNIS PORTState  
MAZip Code  
02647-0507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.04

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698255**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKER, PATRICIA, V., MS.,**

Mailing Address 1470 RIVERVIEW DR.

City  
LEWISPORTState  
KYZip Code  
42351-2434FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.65

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698176**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALKER, PATRICIA, V., MS.,**

Mailing Address 1470 RIVERVIEW DR.

City  
LEWISPORTState  
KYZip Code  
42351-2434FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

319.65

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698184**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3670 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALKER, PATRICIA, V., MS.,**

Mailing Address 1470 RIVERVIEW DR.

City  
LEWISPORTState  
KYZip Code  
42351-2434FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698191**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WASMER, PEDRO, E., MR.,**

Mailing Address 201 OLD ACADEMY ROAD

City  
FAIRFIELDState  
CTZip Code  
06824-7162FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698373**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRISTOL MYERS SQUIBBOccupation (for Individual)  
COMPETITIVE INTELLIGENCE STRAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27696762**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3671 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATTS SOQUET, L., ANITA, MS.,**

Mailing Address 4155 TUDOR CENTRE DRIVE, SUITE 208

City  
ANCHORAGEState  
AKZip Code  
99508-5912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.38

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696517**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEBB, ROSS, A., MR.,**

Mailing Address 6312 N LE MAI AVE.

City  
CHICAGOState  
ILZip Code  
60646-4828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.20

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698253**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEBSTER, DANIEL, , ,**

Mailing Address 15724 LAKE HODGE CT

City  
CLERMONTState  
FLZip Code  
34711-9655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOUSE OF REPRESENTATIVESOccupation (for Individual)  
MEMBER OF CONGRESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

692.50

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698451**

Amount of Each Receipt this Period

125.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3672 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELLS, JOE, , ,**

Mailing Address 207 JULIUS AVENUE

City  
PIKEVILLEState  
KYZip Code  
41501-1739FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MASON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.76

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697596**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WELLS, SHARON, , ,**

Mailing Address 14004 E 24TH AVE

City  
SPOKANE VALLEYState  
WAZip Code  
99037-8341FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NAFICY CENTEROccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696617**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEST, THERESA, , ,**

Mailing Address 148 MAPLE CV

City  
ONALASKAState  
TXZip Code  
77360-7016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

586.63

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698543**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3673 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698573**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHEELER, STEVEN, R., MR.,**

Mailing Address 21631 E 101ST ST S

City  
BROKEN ARROWState  
OKZip Code  
74014-3645FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.87

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697181**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

371.31

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27698254**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3674 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, CATHERINE, L., ,**

Mailing Address PO BOX 127

City  
SCHERTZState  
TXZip Code  
78154-0127FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697508

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, PHILLIP, , ,**

Mailing Address 7866 TUMBLEWEED TRL

City  
SPRINGFIELDState  
ILZip Code  
62707-4582FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHILLIP B WILSONOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27697973

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOOD, CRAIG, , ,**

Mailing Address 87-215 MAMOALII WAY

City  
WAIANAEState  
HIZip Code  
96792-3219FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11A.27696413

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

111.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3675 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODS, WILLIAM, , ,**

Mailing Address 5508 S CASTLEBAY DR.

City  
SPRINGFIELDState  
MOZip Code  
65809-4607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696640**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YEO, ANDREW, , ,**

Mailing Address 8131 CEDAR RUN DR

City  
MARTINSVILLEState  
INZip Code  
46151-9028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27697798**

Amount of Each Receipt this Period

225.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YOUNGE, BRIAN, , MR.,**

Mailing Address 110 E CENTER ST

City  
MADISONState  
SDZip Code  
57042-2908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

449.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA11A.27696702**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

425.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3676 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNGBLOOD, MICHAEL, RALPH, ,**

Mailing Address 40499 EMERALD LN W

City  
CLINTON TOWNSHIPState  
MIZip Code  
48038-4753FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PLASTIC SERVICE CENTERS INCOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698133**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNG, PATRICIA, , ,**

Mailing Address 9940 PREMIERE VIEW CIR

City  
HAGERSTOWNState  
MDZip Code  
21740-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27697883**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZEIGLER, DANIEL, F., MR.,**

Mailing Address 1088 LOCKCUFF RD

City  
WILLIAMSPORTState  
PAZip Code  
17701-8532FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

448.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA11A.27698335**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.93



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3677 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11C.27699256

Amount of Each Receipt this Period

76326.08

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABT, OLIVE, MAY, MS.,**

Mailing Address 8700B ARTHUR KNIGHT DR. APT. 206

City  
PERRY HALLState  
MDZip Code  
21128-8026FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700325

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

SELF EMPLOYED

CONSULTANT

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701370

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

41.44

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3678 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADDEO, WILLIAM, , ,**

Mailing Address 1296 CR 549

City  
HANCEVILLEState  
ALZip Code  
35077-6747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701371**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADKINS, MARY, , ,**

Mailing Address 416 SW 725TH RD

City  
CHILHOWEEState  
MOZip Code  
64733-9229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700803**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AGEE, BILL, , ,**

Mailing Address 34542 CALLE PALOMA

City  
CAPISTRANO BEACHState  
CAZip Code  
92624-1454FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ARTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

333.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699968**

Amount of Each Receipt this Period

0.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3679 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AGEE, BILL, , ,**

Mailing Address 34542 CALLE PALOMA

City  
CAPISTRANO BEACHState  
CAZip Code  
92624-1454FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ARTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699971

Amount of Each Receipt this Period

0.20

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AGEE, BILL, , ,**

Mailing Address 34542 CALLE PALOMA

City  
CAPISTRANO BEACHState  
CAZip Code  
92624-1454FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ARTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701067

Amount of Each Receipt this Period

0.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AGEE, BILL, , ,**

Mailing Address 34542 CALLE PALOMA

City  
CAPISTRANO BEACHState  
CAZip Code  
92624-1454FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ARTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

333.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701069

Amount of Each Receipt this Period

0.20

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3680 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AGUILERA, ROBERT, A., MR.,**

Mailing Address 8185 BENEVENTO DR

City  
EL DORADO HILLSState  
CAZip Code  
95762-6217FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700075**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALDEN, ARTHUR, , ,**

Mailing Address 1381 HARBOURTOWNE DR.

City  
MYRTLE BEACHState  
SCZip Code  
29577-6374FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701294**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALFARO, ROSA, , ,**

Mailing Address 3059 HAWKSCREST DR

City  
WINCHESTERState  
CAZip Code  
92596-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

710.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699328**

Amount of Each Receipt this Period

7.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3681 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALRED, SHERRY, , ,**

Mailing Address 165 SCENIC VALLEY RD

City  
KERRVILLEState  
TXZip Code  
78028-7924FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.66

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700585**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALRED, SHERRY, , ,**

Mailing Address 165 SCENIC VALLEY RD

City  
KERRVILLEState  
TXZip Code  
78028-7924FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.66

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700591**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.88

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701353**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3682 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

**Transaction ID : SA11A.27701607**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMYX, PATRICIA, H., MRS.,**

Mailing Address 4382 N ROSEPOINT AVE

City  
MERIDIANState  
IDZip Code  
83646-3702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

**Transaction ID : SA11A.27700507**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMYX, PATRICIA, H., MRS.,**

Mailing Address 4382 N ROSEPOINT AVE

City  
MERIDIANState  
IDZip Code  
83646-3702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

**Transaction ID : SA11A.27700513**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3683 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CLAUDIA, , ,**

Mailing Address 1625 WEST LOIS MEADOWS COURT

City  
BLUFFDALEState  
UTZip Code  
84065-5225FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700873

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700263

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700416

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

119.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3684 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CYNNIE, , ,**

Mailing Address 55 RODEO AVENUE # 5

City  
SAUSALITOState  
CAZip Code  
94965-1738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

**Transaction ID : SA11A.27701303**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

**Transaction ID : SA11A.27700111**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

**Transaction ID : SA11A.27700358**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.82



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3685 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, RANDY, H., MR.,**

Mailing Address 335 DEVONSHIRE DR.

City  
BREAState  
CAZip Code  
92821-6010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701112**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARTHUR, HARRY, , ,**

Mailing Address 1774 JOHN ANDERSON

City  
ORMOND BEACHState  
FLZip Code  
32176-3231FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.44

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701167**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AZEVEDO, KATHRYN, N., MRS.,**

Mailing Address 1108 VALLEY VIEW DR.

City  
ENNISState  
TXZip Code  
75119-8036FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

508.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699808**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3686 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BALDWIN, JAMES, , MR.,**

Mailing Address 9 MAURA LANE

City  
DANBURYState  
CTZip Code  
06810-7118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700704**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAMERT, TOM, , ,**

Mailing Address BOX 336

City  
IONEState  
CAZip Code  
95640-0336FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1402.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701175**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BANGERT, MARILYN, , MRS.,**

Mailing Address 8713 US HWY 85

City  
FORT LUPTONState  
COZip Code  
80621-9309FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

447.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701362**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.96

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3687 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARBER, WILLIAM, , ,**

Mailing Address 408 COLLEGE AVE

City  
WEST CHESTER

State  
PA

Zip Code  
19382-3556

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BUCKEYE PARTNERS

Occupation (for Individual)  
PIPELINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.34

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27700807**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARBER, WILLIAM, , ,**

Mailing Address 408 COLLEGE AVE

City  
WEST CHESTER

State  
PA

Zip Code  
19382-3556

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BUCKEYE PARTNERS

Occupation (for Individual)  
PIPELINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.34

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27700809**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARBER, WILLIAM, , ,**

Mailing Address 408 COLLEGE AVE

City  
WEST CHESTER

State  
PA

Zip Code  
19382-3556

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BUCKEYE PARTNERS

Occupation (for Individual)  
PIPELINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

448.34

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27700810**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

52.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3688 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARBER, WILLIAM, , ,**

Mailing Address 408 COLLEGE AVE

City  
WEST CHESTERState  
PAZip Code  
19382-3556FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BUCKEYE PARTNERSOccupation (for Individual)  
PIPELINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700820**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARBIN, LOUIS, , ,**

Mailing Address 132 ROYAL LN

City  
POOLERState  
GAZip Code  
31322-3958FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701035**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARILLARO, MARYANN, , MS.,**Mailing Address 130 WATER ST  
APT 1ACity  
NEW YORKState  
NYZip Code  
10005-1622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

681.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701590**

Amount of Each Receipt this Period

17.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3689 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARNETT, EARL, , ,**

Mailing Address 1404 DRUMMOND CEMETERY RD

City  
JASPERState  
ALZip Code  
35504-5408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701542**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEALS, JOSEPH, M., MR.,**

Mailing Address 45 RENAUD RD

City

GROSSE POINTE SHOR

State

MI

Zip Code

48236-1741

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ST. CLAIR SPECIALTY PHYSICIANSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700100**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEAUDOIN, ROBERT, P., MR.,**

Mailing Address 2673 TORREY PINES DR

City

BRENTWOOD

State

CA

Zip Code

94513-7089

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699593**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3690 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BECKWITH, ART, , MR.,**

Mailing Address P.O. BOX 1029, 507 BUS.

City  
PROGRESOState  
TXZip Code  
78579-1029FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.05

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701024**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BENSON, ELIZABETH, , ,**Mailing Address 200 N OCEAN BLVD  
9NCity  
DELRAY BEACHState  
FLZip Code  
33483-7178FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.94

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700607**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BENSON, ELIZABETH, , ,**Mailing Address 200 N OCEAN BLVD  
9NCity  
DELRAY BEACHState  
FLZip Code  
33483-7178FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

655.94

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700615**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3691 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BENSON, PATTI, , ,**

Mailing Address PO BOX 158

City  
EUREKAState  
NVZip Code  
89316-0158FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699557**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERRY, MARILYN, , ,**

Mailing Address 40242 E LOUISIANA

City  
BENNETTState  
COZip Code  
80102-8436FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699275**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BIVIANO, GLEN, , ,**

Mailing Address 1125 PEQUASH AVENUE

City  
CUTCHOGUEState  
NYZip Code  
11935-1451FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GJBTRANSLLCOccupation (for Individual)  
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

333.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701724**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3692 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

Transaction ID : SA11A.27701475

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLAUVELT, SHIRLEY, M., MS.,**

Mailing Address 15523 CHENAL RD.

City  
JARREAUState  
LAZip Code  
70749-3513FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

Transaction ID : SA11A.27701741

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOBZIEN, ANN, , ,**

Mailing Address 52 RAVEN DRIVE

City  
ROCKY POINTState  
NCZip Code  
28457-9440FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

583.89

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

Transaction ID : SA11A.27699258

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

127.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3693 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BORDEN, MIKE, , ,**

Mailing Address 40 GOLF ESTATES DR.

City  
LAS VEGASState  
NVZip Code  
89141-6078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701718**

Amount of Each Receipt this Period

4700.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700604**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOU, SOKHOEUN, , ,**

Mailing Address 12 WOODBRIDGE MANOR ROAD

City  
ANSONIAState  
CTZip Code  
06401-2626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MEDTRONICOccupation (for Individual)  
TECH III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

417.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701385**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4771.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3694 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUCHER, PAUL, , ,**

Mailing Address 551 SW SANCTUARY DR.

City  
PORT SAINT LUCIEState  
FLZip Code  
34986-2043FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IWTOccupation (for Individual)  
PRESIDENT AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701113**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOULINEAU, EDWARD, C., MR.,**

Mailing Address 100 CIRCLE DR

City  
STATESBOROState  
GAZip Code  
30461-0578FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700087**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRACKEN, KAY, , ,**

Mailing Address 405 HAMVASY

City  
TYLERState  
TXZip Code  
75701-5324FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRACKEN INTERESTOccupation (for Individual)  
OIL AND GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2334.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700413**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

254.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3695 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRADLEY, MOLLY, , ,

Mailing Address 2705 BIRMINGHAM

City  
BIRMINGHAMState  
ALZip Code  
35243-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701558

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRASIE, DONALD, R., MR.,

Mailing Address 4860 LONE OAK CT

City  
ANN ARBORState  
MIZip Code  
48108-8575FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701297

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRASIE, DONALD, R., MR.,

Mailing Address 4860 LONE OAK CT

City  
ANN ARBORState  
MIZip Code  
48108-8575FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

712.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701373

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3696 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BREWSTER, HENRY, , ,**

Mailing Address 646 MOUNTAIN VIEW ROUD

City  
UNION GROVEState  
ALZip Code  
35175-8207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699301**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRICKER, DONALD, , ,**

Mailing Address 1532 CR 222

City  
DURANGOState  
COZip Code  
81303-8101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

745.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700079**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, JAMES, , ,**

Mailing Address 146 AARONVALE

City  
BIRMINGHAMState  
ALZip Code  
35242-7353FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GSAOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701424**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

370.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3697 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, LINDA, S., ,**

Mailing Address 8561 ANDERSON CREEK CIR  
APT 1204

City  
DALLAS

State  
TX

Zip Code  
75243-1374

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.51

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27701031**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City

LITTLE MOUNTAIN

State  
SC

Zip Code  
29075-0124

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27700553**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City

LITTLE MOUNTAIN

State  
SC

Zip Code  
29075-0124

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27700555**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

41.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3698 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700559

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700561

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700566

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3699 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700567

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700568

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700570

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.06



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3700 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700577

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700676

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700678

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

23.82



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3701 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700682

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700687

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700691

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3702 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700692

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700693

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700694

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3703 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700697

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701205

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701210

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.42

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3704 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701213**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701215**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701235**

Amount of Each Receipt this Period

0.45

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3705 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701236**

Amount of Each Receipt this Period

0.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701634**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUDGE, WILLIAM, A., MR.,**

Mailing Address 402 EMERALD BAY

City  
LAGUNA BEACHState  
CAZip Code  
92651-1215FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699975**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

199.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3706 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BULLARD, SUE, , ,**

Mailing Address 123 FOREST RIDGE DR.

City  
STERLINGState  
VAZip Code  
20164-2111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.80

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700836**

Amount of Each Receipt this Period

108.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURROW, WILEY, , ,**

Mailing Address 19429 LAUREL GLEN AVE.

City  
CORNELIUSState  
NCZip Code  
28031-6505FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.97

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700815**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUSBY, CHARLOTTE, , ,**

Mailing Address 5110 BEECH ST

City  
BELLAIREState  
TXZip Code  
77401-3327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1628.81

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700205**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

283.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3707 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CADIGAN, TANDRA, L., DR.,**

Mailing Address 19 SEA ST

City  
ROCKPORTState  
MEZip Code  
04856-4443FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TANDRA CADIGANOccupation (for Individual)  
OB/GYN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700901

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699545

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699802

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

208.21



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3708 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699985**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, FRANCIS, C., MR.,**

Mailing Address 5432 S SALVATION PL.

City  
SIOUX FALLSState  
SDZip Code  
57108-8543FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699733**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, FRANCIS, C., MR.,**

Mailing Address 5432 S SALVATION PL.

City  
SIOUX FALLSState  
SDZip Code  
57108-8543FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

953.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699831**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.91



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3709 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700146**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARSTENSEN, DENNIS, , ,**

Mailing Address 1107 PERSHING BLVD

City  
CLINTONState  
IAZip Code  
52732-5207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.12

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700399**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700520**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3710 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700531**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CELLER, HERBERT, , ,**

Mailing Address 366 OAK GLEN RD

City  
HOWELLState  
NJZip Code  
07731-8624FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701715**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CERNUDA, HERMINIO, L., MR.,**

Mailing Address 5320 SW 5TH TER

City  
CORAL GABLESState  
FLZip Code  
33134-1126FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

358.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700955**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3711 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHESTNEY, CYNTHIA, , ,**

Mailing Address 4120 LYNDAL ROAD

City  
ALTOONAState  
PAZip Code  
16602-1537FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699592**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHRISTIE, JOHN, , ,**

Mailing Address 1575 HERITAGE DR, STE 107

City  
MCKINNEYState  
TXZip Code  
75069-3395FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

698.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700992**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CIPOLLINA, NATALE, , ,**

Mailing Address 6 S 12TH ST

City  
NEW HYDE PARKState  
NYZip Code  
11040-4930FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BARUCH COLLEGEOccupation (for Individual)  
ADJUNCT PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700027**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3712 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701519**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARKSON, WALTER, , ,**

Mailing Address 2079 SUJA LANE

City  
COPPERAS COVEState  
TXZip Code  
76522-6121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.42

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700305**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLARKSON, WALTER, , ,**

Mailing Address 2079 SUJA LANE

City  
COPPERAS COVEState  
TXZip Code  
76522-6121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.42

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700363**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3713 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLARK, WILLIAM, , ,**

Mailing Address 5040 GOLDEN CIRCLE

City  
DENTONState  
TXZip Code  
76208-3552FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.76

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699535**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COHEN, DAN, , ,**

Mailing Address 2600 NETHERLAND AVE APT 1716

City  
BRONXState  
NYZip Code  
10463-0992FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

564.30

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700429**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLBY, ELINOR, , ,**

Mailing Address 12738 RUE VINCENNES

City  
SAN DIEGOState  
CAZip Code  
92131-2257FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.93

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700925**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

169.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3714 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONSTANZI, CHARLES, B., ,**

Mailing Address P.O. BOX 670

City  
PRINCETONState  
LAZip Code  
71067-0670FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

743.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700508

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COONLY, JOHN, , ,**

Mailing Address 300 WEST AVE APT 2326

City  
AUSTINState  
TXZip Code  
78701-3808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699833

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COONLY, JOHN, , ,**

Mailing Address 300 WEST AVE APT 2326

City  
AUSTINState  
TXZip Code  
78701-3808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

541.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701230

Amount of Each Receipt this Period

34.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

80.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3715 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORLE, PATRICIA, , ,**

Mailing Address 2833 ASH RIDGE DR

City  
DAYTONState  
OHZip Code  
45434-5894FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.16

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701593**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COULTER, DON, A., ,**

Mailing Address 2122 OLD FOUNDRY RD

City  
WEATHERFORDState  
TXZip Code  
76087-2107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701537**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COURTNEY, JOHN, , ,**

Mailing Address 1298 SILVERWOOD DRIVE

City  
OKEMOSState  
MIZip Code  
48864-3092FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.36

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701316**

Amount of Each Receipt this Period

21.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3716 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COX, JUNE, , ,**

Mailing Address 159 NTH 4TH AVE

City  
FORSYTHState  
MTZip Code  
59327-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.74

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699952**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COX, THOMAS, , ,**

Mailing Address 120 SOUTH DEE ROAD

City  
PARK RIDGEState  
ILZip Code  
60068-3720FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ACME MACHELL COOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699717**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699528**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

69.91



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3717 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIG, JUDY, , ,**

Mailing Address 4206 S. CANTAMAR DRIVE

City  
SAINT GEORGEState  
UTZip Code  
84790-4862FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699648

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRANNEY, MICHAEL, , MR.,**

Mailing Address 1111 W 1290 S

City  
PAYSONState  
UTZip Code  
84651-5770FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699540

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRANNEY, MICHAEL, , MR.,**

Mailing Address 1111 W 1290 S

City  
PAYSONState  
UTZip Code  
84651-5770FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699542

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3718 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CROWDER, JIMMIE, K., MR.,**

Mailing Address 711 N. BRUNSWICK AVE.

City  
SOUTH HILLState  
VAZip Code  
23970-1515FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROWDER-HITE-CREWSOccupation (for Individual)  
FUNERAL DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700377**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAHLBERG, NANCY, , MRS.,**

Mailing Address 208 PONDEROSA PINE DR

City  
BLUE EYEState  
MOZip Code  
65611-8244FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INTERIOR DESIGNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701386**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DALE, PAMELA, , ,**

Mailing Address 18890 TIMBERLAKE DR

City  
CLAREMOREState  
OKZip Code  
74017-1443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699405**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3719 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DALLMEYER, KENT, L., MR.,**

Mailing Address 1415 RIDGEVIEW CT

City  
WASHINGTONState  
IAZip Code  
52353-9393FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700760**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DALLMEYER, KENT, L., MR.,**

Mailing Address 1415 RIDGEVIEW CT

City  
WASHINGTONState  
IAZip Code  
52353-9393FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700765**

Amount of Each Receipt this Period

300.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DARR, LUCY, , ,**

Mailing Address 1017 GADWALL CIR

City  
HENDERSONVILLEState  
TNZip Code  
37075-6321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.29

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701363**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

370.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3720 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEAL, JERRY, , ,**

Mailing Address 2929 ONATE ROAD

City  
LAS CRUCESState  
NMZip Code  
88007-8117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701161**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEAN, JOHN, , , JR.**

Mailing Address P.O. BOX 272

City  
LELANDState  
MSZip Code  
38756-0272FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701178**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEAN, MARK, , ,**

Mailing Address PO BOX 2198

City  
PINELANDState  
FLZip Code  
33945-2198FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AGRICULTURE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699860**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

254.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3721 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701562**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DECKERHOFF, LARRY, , ,**

Mailing Address 33 SUMMER COURT

City  
SPRINGState  
TXZip Code  
77381-6229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TECH MOccupation (for Individual)  
AVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699371**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DENHOFF, DIANE, K., ,**

Mailing Address 1908 STATE ROUTE 19

City  
WELLSVILLEState  
NYZip Code  
14895-9740FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.26

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701693**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3722 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DILL, MARY, , ,**

Mailing Address 35 SAN MARINO DR.

City  
SAN RAFAELState  
CAZip Code  
94901-1535FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701744**

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOLLE, BILL, , ,**

Mailing Address 92310 N FM 1264

City  
LUBBOCKState  
TXZip Code  
79415-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701394**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOLLE, BILL, , ,**

Mailing Address 92310 N FM 1264

City  
LUBBOCKState  
TXZip Code  
79415-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701530**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3723 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOMINY, SUSAN, J., MS.,**Mailing Address 1250 NE LINCOLN RD  
APT 127City  
POULSBOState  
WAZip Code  
98370-8539FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STATE FARMOccupation (for Individual)  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699939**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOMINY, SUSAN, J., MS.,**Mailing Address 1250 NE LINCOLN RD  
APT 127City  
POULSBOState  
WAZip Code  
98370-8539FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STATE FARMOccupation (for Individual)  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699942**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOOLEY, JEFFREY, I., ,**

Mailing Address 15685 LA MAR CT

City  
MORGAN HILLState  
CAZip Code  
95037-5682FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701136**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

299.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3724 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUFFY, GERARD, , ,**

Mailing Address 39 BAYBERRY LN

City  
MIDDLETOWNState  
NJZip Code  
07748-1424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699996

Amount of Each Receipt this Period

32.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUFFY, GERARD, , ,**

Mailing Address 39 BAYBERRY LN

City  
MIDDLETOWNState  
NJZip Code  
07748-1424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701343

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUGAN, MIKE, , ,**

Mailing Address 6618 LOWRY BLVD UNIT 315

City  
DENVERState  
COZip Code  
80230-6917FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

546.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700733

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

179.90



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3725 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUMAS, EDWIN, , ,**

Mailing Address 425 RUSTIC OAKS RD

City  
SEAGOVILLEState  
TXZip Code  
75159-5612FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.18

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701691**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNLEVY, PATRICIA, , ,**

Mailing Address 5121 BROWNSTONE DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-6028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.90

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700279**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNLEVY, PATRICIA, , ,**

Mailing Address 5121 BROWNSTONE DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-6028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.90

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700425**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3726 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EADES, LINDA, , ,**

Mailing Address 14250 STATE ROUTE JJ

City  
WEST PLAINSState  
MOZip Code  
65775-5834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699534**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EADES, LINDA, , ,**

Mailing Address 14250 STATE ROUTE JJ

City  
WEST PLAINSState  
MOZip Code  
65775-5834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700980**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EALER, STEVEN, , ,**

Mailing Address 806 HAMILTON STREET

City  
EASTONState  
PAZip Code  
18042-1508FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699991**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3727 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EARL, CONSTANCE, M., MS.,**

Mailing Address 571 GREEN T LK W

City  
HERNANDOState  
MSZip Code  
38632-4511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700025**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699616**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EASTMAN, STEVEN, , ,**

Mailing Address 6848 N GOVERNMENT WAY 114

City  
DALTON GARDENSState  
IDZip Code  
83815-7799FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699532**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3728 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EASTMAN, STEVEN, , ,**

Mailing Address 6848 N GOVERNMENT WAY 114

City  
DALTON GARDENSState  
IDZip Code  
83815-7799FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.11

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699877**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EBERLY, RENEE, , ,**

Mailing Address 10430 EBERLY RANCH RD

City  
CHAPPELL HILLState  
TXZip Code  
77426-5380FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.32

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700379**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EDGINGTON, CAROL, L., ,**

Mailing Address 5580 TAMBERLANE CIR.

City  
PALM BCH GDNSState  
FLZip Code  
33418-4107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

819.43

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699475**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

127.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3729 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EFFKEN, CHRIS, , ,**

Mailing Address 927 S CHERRY ST

City  
FRIENDState  
NEZip Code  
68359-1701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699467

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSONState  
MDZip Code  
21204-4701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699830

Amount of Each Receipt this Period

14.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELAS BOADO, MARIO, , ,**

Mailing Address 40120 SAGEWOOD DR

City  
PALM DESERTState  
CAZip Code  
92260-2321FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

413.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700983

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

154.64

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3730 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELKINS, EVA, P., MRS.,**

Mailing Address 10375 WILSHIRE BLVD  
9G

City  
LOS ANGELES

State  
CA

Zip Code  
90024-4750

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.25

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27700242**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENDORF, BRUCE, , ,**

Mailing Address 312 EAST BROADWAY

City  
LEOTI

State  
KS

Zip Code  
67861-5016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
INNKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27701639**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENGBY, THOMAS, , MR.,**

Mailing Address 1110 S PEAK VIEW DR

City  
CASTLE ROCK

State  
CO

Zip Code  
80109-9525

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1142.88

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27700159**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

95.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3731 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENGSTROM, ROBERT, , ,**

Mailing Address 1375 WEST FORK DRIVE

City  
LAKE FORESTState  
ILZip Code  
60045-3560FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AEQUAL TECHNOLOGIES LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699315**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ERIKSEN, WALTER, , ,**

Mailing Address 11 WALTER PLACE

City  
BELLA VISTAState  
ARZip Code  
72714-3214FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700718**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FALLON, JOHN, , ,**Mailing Address 2702 DOUGLAS AVE  
#125City  
DALLASState  
TXZip Code  
75219-3456FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699271**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

228.20

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3732 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FALLON, JOHN, , ,**

Mailing Address 2702 DOUGLAS AVE  
#125

City  
DALLAS

State  
TX

Zip Code  
75219-3456

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.10

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27699276**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FALLON, JOHN, , ,**

Mailing Address 2702 DOUGLAS AVE  
#125

City  
DALLAS

State  
TX

Zip Code  
75219-3456

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.10

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27699278**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FALLON, JOHN, , ,**

Mailing Address 2702 DOUGLAS AVE  
#125

City  
DALLAS

State  
TX

Zip Code  
75219-3456

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.10

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27699282**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3733 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.12

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701671**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.12

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701686**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

605.12

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701687**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

37.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3734 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700123**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FERRAZZO, JOE, , ,**

Mailing Address 586 WOODLAND DRIVE

City  
MAHTOMEDIState  
MNZip Code  
55115-1492FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699864**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISHER, JEFF, , ,**

Mailing Address 2750 47TH STREET COURT

City  
ROCK ISLANDState  
ILZip Code  
61201-5873FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699336**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

201.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3735 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699262**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699440**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLEGENHEIMER, MARK, , ,**

Mailing Address 3494 VANGUARD DR.

City  
FRISCOState  
TXZip Code  
75034-6678FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699888**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3736 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLETCHER, DEIRDRE, , ,**

Mailing Address 913 HOLLEY LAKE RD

City  
AIKENState  
SCZip Code  
29803-2625FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.82

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699989**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FONTANA, BETTY, , MRS.,**

Mailing Address 2090 LEEWARD LN

City  
MERRITT ISLANDState  
FLZip Code  
32953-3082FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700494**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FORD, TOM, , ,**

Mailing Address 7526 BEAU TERRE

City  
CORPUS CHRISTIState  
TXZip Code  
78414-6290FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
US NAVYOccupation (for Individual)  
GS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699947**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

249.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3737 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORT, BRENDA, , ,**

Mailing Address 3572 ALDER PL

City  
CHINO HILLSState  
CAZip Code  
91709-2007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701662**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FORTNER, EDWARD, , ,**

Mailing Address 13477 AURORA DRIVE

City  
SAN LEANDROState  
CAZip Code  
94577-4032FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700892**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANCE, SHERROD, W., MR.,**

Mailing Address PO BOX 607

City  
RAWLINSState  
WYZip Code  
82301-0607FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

977.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699950**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3738 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRAPS, JOHN, , ,**

Mailing Address 3810 WYANDOTTE TRAIL

City  
INDIANAPOLISState  
INZip Code  
46240-3422FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699738

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRAPS, JOHN, , ,**

Mailing Address 3810 WYANDOTTE TRAIL

City  
INDIANAPOLISState  
INZip Code  
46240-3422FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699744

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRASHRI, PAQSOR, , ,**

Mailing Address 82 HACKBERRY PLACE

City  
CLIFTONState  
NJZip Code  
07013-3629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699439

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

104.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3739 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRASHRI, PAQSOR, , ,**

Mailing Address 82 HACKBERRY PLACE

City  
CLIFTON

State  
NJ

Zip Code  
07013-3629

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.18

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27701472**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRIEDMAN, RICHARD, , MR.,**

Mailing Address 213 S WOODS MILL RD  
APT 4201

City  
CHESTERFIELD

State  
MO

Zip Code  
63017-3504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TELEPHONE DOCTOR

Occupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27701166**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRONCZAK, BRENDA, , ,**

Mailing Address 121 GASCOIGNE BLUFF RD.

City  
BLUFFTON

State  
SC

Zip Code  
29910-6800

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

511.67

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27700346**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3740 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FUNK, MARK, S., MR.,**

Mailing Address PO BOX 2479

City  
GARDNERVILLEState  
NVZip Code  
89410-2479FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699903

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAGNON, BERT, , MR.,**Mailing Address 2455 REMINGTON RD  
3City  
GREEN BAYState  
WIZip Code  
54302-4474FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700045

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLOWAY, JIM, , ,**

Mailing Address 6308 PARK AVENUE

City  
ATLANTAState  
GAZip Code  
30342-2362FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701612

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

129.90



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3741 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAMBERT, LORRAINE, , ,**

Mailing Address 55 N. MOUNTAIN AVENUE, B-9

City  
MONTCLAIRState  
NJZip Code  
07042-2343FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700908**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GARNETT, THOMAS, , ,**

Mailing Address 4789 BETHLEHEM ROAD

City  
CHARLOTTE C HState  
VAZip Code  
23923-4197FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699460**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GELBMAN, JOEL, , ,**

Mailing Address 6476 ARRIBA AVE

City  
NAPLESState  
FLZip Code  
34113-9061FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699468**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3742 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GENTILE, HENRY, , ,**

Mailing Address 736 ARROYO CT

City  
CHULA VISTAState  
CAZip Code  
91910-6602FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KLEINFELDEROccupation (for Individual)  
CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699964**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILMAN, GERALD, , ,**

Mailing Address 33134 LAKE GARRISON STREET

City  
FREMONTState  
CAZip Code  
94555-1222FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699663**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLENN, SAMUEL, , , JR.**Mailing Address 5490 ARBOR BRANCH DR.  
APT 234City  
SHALLOTTEState  
NCZip Code  
28470-6111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700521**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3743 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLICK, LINDA LOU, , ,**

Mailing Address 2485 SUN MANOR, APT B

City  
PARADISEState  
CAZip Code  
95969-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.73

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699424**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLOVER, AVERIL, , ,**

Mailing Address 446 LANCASHIRE RUN

City  
SMITHFIELDState  
NCZip Code  
27577-8029FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.53

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700751**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOODYEAR, PRISCILLA, A., MS.,**

Mailing Address 10042 SIGNET CIRCLE

City  
HUNTINGTON BEACHState  
CAZip Code  
92646-6631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700772**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

157.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3744 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700182**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700212**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, WAITS, , , JR.**

Mailing Address 115 HUNTING LN

City  
MORGANTONState  
NCZip Code  
28655-8348FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699415**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3745 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRATTIDGE, JANICE, , ,**

Mailing Address 3427 SW BRIARWOOD LANE

City  
TOPEKAState  
KSZip Code  
66611-1832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701417

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAYBASH, PETER, J., MR., JR.**

Mailing Address 4 CAMBRIDGE DR.

City  
HERSHEYState  
PAZip Code  
17033-2100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700660

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREENE, BETTY, L., ,**

Mailing Address 711 POSSUM HOLLOW RD

City  
BLOWING ROCKState  
NCZip Code  
28605-9219FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699311

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

77.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3746 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, LINDA, , ,**

Mailing Address 15657 FM 244

City  
IOLAState  
TXZip Code  
77861-3867FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700356**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREINER, DAVID, L., MR.,**

Mailing Address 7047 WEST BELMONT DRIVE

City

LITTLETON

State

CO

Zip Code

80123-0808

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700034**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREINER, MICHAEL, J., ,**

Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

945.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700874**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3747 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIFFIN, WALTER, W., MR.,**

Mailing Address 5213 HAYNES STERCHI RD.

City  
KNOXVILLEState  
TNZip Code  
37912-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699338**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROGAN, KIMBERLY, , ,**

Mailing Address PO BOX 875

City  
MANHATTAN BEACHState  
CAZip Code  
90267-0875FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699722**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROKULSKY, YVONNE, , ,**

Mailing Address 12772 BAY PLANTATION DRIVE

City  
JACKSONVILLEState  
FLZip Code  
32223-0784FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ST. JOSEPH CATHOLIC SCHOOLOccupation (for Individual)  
2ND GRADE AIDE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701132**

Amount of Each Receipt this Period

80.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

126.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3748 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUTHRIE, ANN, , ,**

Mailing Address 30280 NORTHGATE DR.

City  
SOUTHFIELDState  
MIZip Code  
48076-1027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700579**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HACKL, MARK, , ,**

Mailing Address 485 HICKORY NUT AVE

City  
OLDSMARState  
FLZip Code  
34677-2016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701455**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HALL, DON, , ,**

Mailing Address POB 777

City  
BELMONTState  
MSZip Code  
38827-0777FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700055**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.15



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3749 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMLIN, DENNIS, , ,**

Mailing Address 18735 CORSINI DRIVE

City  
SAN ANTONIOState  
TXZip Code  
78258-1629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.04

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700736**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANMER, GARY, , ,**

Mailing Address 3033 HARDING WAY

City  
COSTA MESAState  
CAZip Code  
92626-2852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.04

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700626**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HANSEN, MARY, , ,**

Mailing Address P.O BOX 1018

City  
MUKILTEOState  
WAZip Code  
98275-1018FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

261.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700924**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

71.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3750 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARDIN, JOEL, C., MR.,**

Mailing Address 225 MILL RD

City  
CLEARWATERState  
IDZip Code  
83552-5116FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699785**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARPER, CINDY, , ,**

Mailing Address 4444 HALIFAX DR

City  
PORT ORANGEState  
FLZip Code  
32127-4535FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700339**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRAH, TONY, , ,**

Mailing Address 355 BOXINGTON WAY

City  
SPARKSState  
NVZip Code  
89434-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2456.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700083**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3751 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRAH, TONY, , ,**

Mailing Address 355 BOXINGTON WAY

City  
SPARKSState  
NVZip Code  
89434-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2456.46

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701310**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAYES, JOHN, , ,**

Mailing Address 3548 PEBBLE BEACH DR.

City  
AUGUSTAState  
GAZip Code  
30907-9520FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.25

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699614**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699666**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3752 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HELLING, JOHN, , MR.,**

Mailing Address 129 GIGI LN

City  
LOUDONState  
TNZip Code  
37774-2916FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699569**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERMES, WARREN, , MR.,**

Mailing Address 3925 WASHINGTON ST

City  
HOLLYWOODState  
FLZip Code  
33021-7348FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LPLOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701700**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERREN, WILLIAM, E., MR.,**

Mailing Address 2201 WOODRIDGE DR

City  
JASPERState  
ALZip Code  
35504-9555FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

246.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700769**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3753 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HESS, SUZANNE, , ,**

Mailing Address 5590 N BARRASCA AVE

City  
TUCSONState  
AZZip Code  
85750-6494FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701490**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEWITT, DIANE, , MS.,**

Mailing Address 8299 HEWITT LN

City  
EDISTO ISLANDState  
SCZip Code  
29438-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699746**

Amount of Each Receipt this Period

32.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEWITT, DIANE, , MS.,**

Mailing Address 8299 HEWITT LN

City  
EDISTO ISLANDState  
SCZip Code  
29438-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699834**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

167.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3754 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HICKS, JERRY, , ,**

Mailing Address 1261 DENALI DR, #146

City  
FESTUSState  
MOZip Code  
63028-2382FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700852**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, ROSALIE, , ,**

Mailing Address 8824 33RD ST E

City  
EDGEWOODState  
WAZip Code  
98371-2803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701338**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699330**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3755 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLMQUIST, RICHARD, , MR.,**

Mailing Address 6113 E. BOSTON ST.

City  
MESAState  
AZZip Code  
85205-8321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701014**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOPKINS, GEORGE, , ,**

Mailing Address 135 CR 2984

City  
HUGHES SPRINGSState  
TXZip Code  
75656-6715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699916**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HORVATH, JIM, , ,**

Mailing Address 555 EAST RIVER ROAD

City  
TUCSONState  
AZZip Code  
85704-5843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1190.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700631**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

292.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3756 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700887**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.56

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699419**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

432.56

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699429**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.20



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3757 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. IRWIN, BEVERLY, , ,

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700271

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. IRWIN, BEVERLY, , ,

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700477

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. IRWIN, BEVERLY, , ,

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700483

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3758 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.56

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701681**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ISBELL, BETTYE, , ,**

Mailing Address 9806 JOHN ROLFE DR.

City  
SAN ANTONIOState  
TXZip Code  
78230-3212FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.65

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700104**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ISBELL, BETTYE, , ,**

Mailing Address 9806 JOHN ROLFE DR.

City  
SAN ANTONIOState  
TXZip Code  
78230-3212FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.65

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700125**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3759 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACKSON, MARLA, , ,**

Mailing Address 14959 CURRY ST

City  
MORENO VALLEY

State  
CA

Zip Code  
92553-5019

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.89

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27699710**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACKSON, RUBY, , ,**

Mailing Address 4413 YALE ST  
UNIT C

City  
METAIRIE

State  
LA

Zip Code  
70006-4243

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27700071**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACOBS, MICHAEL, , ,**

Mailing Address 3 WHITE OAK DR.  
APT C

City  
SMITHFIELD

State  
NC

Zip Code  
27577-4872

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

502.34

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27701300**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

82.05

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3760 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAUDES, MARY, K., MRS.,**

Mailing Address 12657 BRADFORD WOODS DR.

City  
SAINT LOUIS

State  
MO

Zip Code  
63127-1360

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.95

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27699342**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAUDES, MARY, K., MRS.,**

Mailing Address 12657 BRADFORD WOODS DR.

City  
SAINT LOUIS

State  
MO

Zip Code  
63127-1360

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.95

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27699365**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, ANN, W., MRS.,**

Mailing Address 444 POLIHALE WAY

City  
NAPLES

State  
FL

Zip Code  
34114-8351

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.90

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27701266**

Amount of Each Receipt this Period

24.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

26.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3761 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSTON, DAVID, R., MR.,**

Mailing Address 341 BLOCK ST

City  
FRANKENMUTHState  
MIZip Code  
48734-1155FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700031**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGSState  
IDZip Code  
83276-1671FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700865**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSTON, SANDRA, , ,**

Mailing Address 32 NEW VILLAGE LN

City  
SMYRNAState  
DEZip Code  
19977-4715FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700248**

Amount of Each Receipt this Period

14.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3762 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOLLEY, SUE, , MS.,**

Mailing Address 2807 CROSSVINE CIRCLE

City  
THE WOODLANDSState  
TXZip Code  
77380-1396FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.20

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700069**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, HOWARD, R., MR.,**

Mailing Address 5626 FOREST GLEN DR

City  
GROVE CITYState  
OHZip Code  
43123-9413FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.58

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700020**

Amount of Each Receipt this Period

36.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701508**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3763 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, PAT, A., ,**

Mailing Address 5471 CEDAR BRANCH CIR.

City  
INDIANAPOLISState  
INZip Code  
46268-3925FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.99

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700960**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JUEL, NORMAN, , ,**

Mailing Address 1620 W 2ND STREET LOT 34

City  
ROCK SPRINGSState  
WYZip Code  
82901-7662FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.55

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700847**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KALLENBERGER, ROSS, , ,**

Mailing Address 9512 DURAND OAK COURT

City  
BAKERSFIELDState  
CAZip Code  
93311-1707FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.42

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699294**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3764 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAMINSKI, BARBARA, , ,**

Mailing Address 214 WATERFORD DR.

City  
EDISONState  
NJZip Code  
08817-1914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700759

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAMINSKI, BARBARA, , ,**

Mailing Address 214 WATERFORD DR.

City  
EDISONState  
NJZip Code  
08817-1914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701041

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701618

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.44



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3765 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITA

State  
KS

Zip Code  
67207-6320

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27701619**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITA

State  
KS

Zip Code  
67207-6320

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27701620**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITA

State  
KS

Zip Code  
67207-6320

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27701621**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

52.82

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3766 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITA

State  
KS

Zip Code  
67207-6320

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27701622**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITA

State  
KS

Zip Code  
67207-6320

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27701630**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITA

State  
KS

Zip Code  
67207-6320

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27701631**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

56.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3767 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701632**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANTALIS, A. J., , ,**

Mailing Address 1239 WYNDEN COURT

City  
HOUSTONState  
TXZip Code  
77056-2527FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699938**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAVAL, KATHLEEN, , ,**

Mailing Address 1596 WANTAGH AVE.

City  
WANTAGHState  
NYZip Code  
11793-3902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.62

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699257**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3768 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699589

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699381

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEMP, KIRKLAND, , ,**

Mailing Address 2188 WASHINGTON AVE

1

City  
BRONXState  
NYZip Code  
10457-2589FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700049

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

108.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3769 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KENDALL, KIM, , ,**

Mailing Address 20075 HERRINGBONE DR.

City  
MACOMBState  
MIZip Code  
48044-2843FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699838**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KERNS, DIANA, , ,**

Mailing Address 3529 CHELLEN DRIVE

City  
FARMERS BRANCHState  
TXZip Code  
75234-6621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700584**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, JACOB, , ,**

Mailing Address 1024 HEATHERFIELD LANE

City  
GLENVIEWState  
ILZip Code  
60025-3331FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HMD TRUCKINGOccupation (for Individual)  
SEMI TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701432**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

400.79

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3770 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KIRSHNER, STUART, , MR.,**

Mailing Address 22 VANGOGH LANE

City  
SUFFERNState  
NYZip Code  
10901-7725FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700210

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNOWLES, RICHARD, N., DR.,**Mailing Address 6083 BAHIA DEL MAR CIRCLE  
UNIT 564

City

SAINT PETERSBURG

State

FL

Zip Code

33715-2377

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.65

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700527

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City

SPRING HILL

State

FL

Zip Code

34607-4051

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699827

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3771 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700775**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KORMYLO, KENT, , MR.,**

Mailing Address 4751 E 3900 N

City  
EDENState  
UTZip Code  
84310-1719FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.10

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699505**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOVATCH, INES, E., MS.,**

Mailing Address 16537 PENDIO DR.

City  
MONTVERDEState  
FLZip Code  
34756-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701502**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3772 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUEHN, CYNTHIA, , ,**Mailing Address 12500 EDGEWATER DRIVE  
1407City  
LAKEWOODState  
OHZip Code  
44107-1656FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700188**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699355**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUSHINER, GREGG, , ,**

Mailing Address 6732 BADGER LAKE CT

City  
NORTH LAS VEGASState  
NVZip Code  
89084-2388FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699541**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3773 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAGE, JOHN, R., MR.,**Mailing Address **BOX 314**City  
**SHEFFIELD**State  
**IA**Zip Code  
**50475-0314**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**531.16**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02	/	18	/	2025

**Transaction ID : SA11A.27700006**

Amount of Each Receipt this Period

**78.08**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAI, SUE, , ,**Mailing Address **157 HIDDEN ROAD**City  
**ANDOVER**State  
**MA**Zip Code  
**01810-4933**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**977.55**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02	/	18	/	2025

**Transaction ID : SA11A.27699642**

Amount of Each Receipt this Period

**50.00**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAIRD, GORDON, , ,**Mailing Address **39451 E 41RD**City  
**MORRISON**State  
**OK**Zip Code  
**73061-**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**PAWNEE HEALTH AND WELLNESS**Occupation (for Individual)  
**PHYSICIAN**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**293.72**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02	/	18	/	2025

**Transaction ID : SA11A.27699387**

Amount of Each Receipt this Period

**104.10**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►**232.18**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3774 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAMPRECHT, MARSHA, , ,**

Mailing Address 1361 E LAIRD

City  
SALT LAKE CITYState  
UTZip Code  
84105-1953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700677**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANDESMAN, MARIA, A., MRS.,**

Mailing Address 920 PARK AVE. APT. 10A

City  
NEW YORKState  
NYZip Code  
10028-0369FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701021**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANDESMAN, MARIA, A., MRS.,**

Mailing Address 920 PARK AVE. APT. 10A

City  
NEW YORKState  
NYZip Code  
10028-0369FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701063**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

338.54

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3775 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LANDESMAN, MARIA, A., MRS.,

Mailing Address 920 PARK AVE. APT. 10A

City  
NEW YORKState  
NYZip Code  
10028-0369FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701086

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANDSAW, RUTH, W., ,

Mailing Address 14481 DAWN HILL RD.

City  
SILOAM SPRINGSState  
ARZip Code  
72761-8249FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699776

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANE, DAVINA, , ,

Mailing Address 11323 PACIFIC ST.

City  
COLUMBIAState  
CAZip Code  
95310-9603FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

454.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701541

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3776 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANT, VICKI, , ,**

Mailing Address 200 DORSEY LANE

City  
MILTONState  
DEZip Code  
19968-1348FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701393**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANTZ, IRENE, L., ,**

Mailing Address 8175 W FARM ROAD 168

City  
REPUBLICState  
MOZip Code  
65738-9327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700703**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAVERTY, CHRISTINE, , ,**

Mailing Address 117 ROLLING MILLS DR.

City  
VALENCIAState  
PAZip Code  
16059-3323FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699810**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

211.79

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3777 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAVERTY, CHRISTINE, , ,**

Mailing Address 117 ROLLING MILLS DR.

City  
VALENCIA

State  
PA

Zip Code  
16059-3323

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.80

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

Transaction ID : SA11A.27699812

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAYCOCK, JAMES, , ,**

Mailing Address 7628 GANNON AVENUE

City  
UNIVERSITY CITY

State  
MO

Zip Code  
63130-2819

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

ENTERPRISE

Occupation (for Individual)

PART TIME DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

Transaction ID : SA11A.27701488

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAYCOCK, JAMES, , ,**

Mailing Address 7628 GANNON AVENUE

City  
UNIVERSITY CITY

State  
MO

Zip Code  
63130-2819

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

ENTERPRISE

Occupation (for Individual)

PART TIME DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

Transaction ID : SA11A.27701495

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

64.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3778 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAYO, LEWIS, DANIEL, MR., SR.**

Mailing Address 2316 W VINE ST

City  
LODIState  
CAZip Code  
95242-3727FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
H&R BLOCK TAX GROUPOccupation (for Individual)  
ENROLLED AGENT/TAX PREPARATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700246**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699684**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700187**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.80

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3779 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEENSTRA, BARBARA, , ,

Mailing Address 5305 CROCUS CT

City  
HOLLY SPRINGSState  
NCZip Code  
27540-8630FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699798

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LELEUX, DAVID, , ,

Mailing Address 3 HEATHERSTONE DR.

City  
LAFAYETTEState  
LAZip Code  
70508-4913FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENGINEEROccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700369

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEWIS, ED, , ,

Mailing Address 19585 NORTH 101ST STREET

City  
SCOTTSDALEState  
AZZip Code  
85255-3786FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

629.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699697

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

287.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3780 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEYSHON, DAVID, W., MR.,**

Mailing Address 1608 HONEYSUCKLE CT

City  
WEST CHESTERState  
PAZip Code  
19380-4361FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SHELF STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700178

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEYSHON, DAVID, W., MR.,**

Mailing Address 1608 HONEYSUCKLE CT

City  
WEST CHESTERState  
PAZip Code  
19380-4361FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SHELF STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700790

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

967.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700089

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3781 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIKES, KATHY, , ,**

Mailing Address 3184 RESERVOIR DR.

City  
SIMI VALLEYState  
CAZip Code  
93065-1014FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700252**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIU, ARTHUR, , ,**

Mailing Address P.O. BOX 16669

City  
ENCINOState  
CAZip Code  
91416-6669FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699668**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699791**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3782 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

Transaction ID : SA11A.27699797

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOGGINS, BRUCE, , ,**

Mailing Address 900 AVE L P.O. BOX 519

City  
SUNRAYState  
TXZip Code  
79086-0519FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ISCOccupation (for Individual)  
ELECTRICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

Transaction ID : SA11A.27700864

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUQUIRE, JOSEPH, , ,**

Mailing Address 3440 S JEFFERSON STREET APT 1109

City  
FALLS CHURCHState  
VAZip Code  
22041-3130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

Transaction ID : SA11A.27700116

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3783 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUTSCHG, VIVIAN, , MRS.,**

Mailing Address 2400 MAPLE ST.

City  
CHADRONState  
NEZip Code  
69337-9369FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699487**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUTTENBERGER, RUDY, , ,**

Mailing Address 17426 N 2ND PL

City  
PHOENIXState  
AZZip Code  
85022-1805FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

793.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701360**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LYNCH, JEFFREY, , ,**

Mailing Address 5922 MAPLESHADE LN

City  
DALLASState  
TXZip Code  
75252-2353FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LYNCH LAW FIRMOccupation (for Individual)  
TRIAL LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

332.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701255**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3784 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MA, HOMER, , ,**

Mailing Address 1819 HAPP RD

City  
NORTHBROOKState  
ILZip Code  
60062-5640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701569**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACEYKO, ROBERT, , ,**

Mailing Address 45 HIGHLAND AVE

City  
WALDENState  
NYZip Code  
12586-1429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BERNIES BUS SERVICE INC.Occupation (for Individual)  
SCHOOL BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.57

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700321**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACEYKO, ROBERT, , ,**

Mailing Address 45 HIGHLAND AVE

City  
WALDENState  
NYZip Code  
12586-1429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BERNIES BUS SERVICE INC.Occupation (for Individual)  
SCHOOL BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

366.57

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700689**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3785 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACEYKO, ROBERT, , ,**

Mailing Address 45 HIGHLAND AVE

City  
WALDENState  
NYZip Code  
12586-1429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BERNIES BUS SERVICE INC.Occupation (for Individual)  
SCHOOL BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.57

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700745**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACHADO, LEONARD, , ,**

Mailing Address 21520 G YORBA LINDA BLVD

City  
YORBA LINDAState  
CAZip Code  
92887-3764FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701503**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAHADKAR, MOHAN, , ,**

Mailing Address 4 ARIANA COURT

City  
OYSTER BAYState  
NYZip Code  
11771-3417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

326.16

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701528**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

80.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3786 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MALONE, JOHN, C., ,**

Mailing Address 440 SOUTH BEACH RD

City  
HOBE SOUNDState  
FLZip Code  
33455-2702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1880.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701465**

Amount of Each Receipt this Period

940.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARINARO, BARBARA, , ,**

Mailing Address 2368 SOUNDSIDE CT

City  
LELANDState  
NCZip Code  
28451-5700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.20

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701295**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, CHRISTOPHER, , MR.,**

Mailing Address 2794 CARLARIS RD

City  
SAN MARINOState  
CAZip Code  
91108-1715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AC MARTINOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701085**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1094.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3787 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699836**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699840**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASSEE, DONALD, R., MR.,**

Mailing Address 6221 CENTURY HILL DR.

City  
RIVERSIDEState  
CAZip Code  
92506-4666FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RIVERSIDE RADIOLOGYOccupation (for Individual)  
RADIOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701601**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1040.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3788 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASTRO, MABEL, , ,**

Mailing Address 4616 PRAIRIE POINT BOULEVARD

City  
KISSIMMEEState  
FLZip Code  
34746-6364FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

889.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700033**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATEER, RAYMOND, , ,**

Mailing Address 1278 MATEER RD

City  
KIT TANNINGState  
PAZip Code  
16201-8024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700516**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATULA, LOIS, , ,**

Mailing Address 580 FREEMAN LANE

City  
LA VERNIAState  
TXZip Code  
78121-2102FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SALES ASSOCIATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700292**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3789 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCBRIDE, JIM, , ,**

Mailing Address 11525 CARNATION DUVALL RD NE

City  
CARNATIONState  
WAZip Code  
98014-9514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700464**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCLELLAN, REBECCA, A., MS.,**

Mailing Address 12000 E. PRINCE RD.

City  
TUCSONState  
AZZip Code  
85749-9044FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RAM-MAC PRODUCTSOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701026**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCGRAW, MICHAEL, , ,**

Mailing Address 5305 SUMTER LANE

City  
SPRINGFIELDState  
ILZip Code  
62711-7415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699727**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

186.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3790 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCHUGH, RICHARD, , ,**

Mailing Address 3016 NE 154 AVE.

City  
VANCOUVERState  
WAZip Code  
98682-8429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.96

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699618**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCKINNEY, JOHN, A., ,**

Mailing Address 2430 E BETHEL DR.

City  
ANAHEIMState  
CAZip Code  
92806-4705FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.56

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699721**

Amount of Each Receipt this Period

11.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEYERS-GLYDA, DONNA, , MS.,**

Mailing Address 7512 VALHALLA DRIVE

City  
MAUMEEState  
OHZip Code  
43537-9512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SERENITY REALTYOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.74

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699432**

Amount of Each Receipt this Period

5.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3791 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEYERS-GLYDA, DONNA, , MS.,**

Mailing Address 7512 VALHALLA DRIVE

City  
MAUMEEState  
OHZip Code  
43537-9512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SERENITY REALTYOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.74

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699438**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIKULICH, JOHN, , , II**

Mailing Address 4120 PURPLE RIDGE CT

City  
LAS VEGASState  
NVZip Code  
89129-5484FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.18

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701504**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILES, DIANNE, E., MRS.,**

Mailing Address 2661 TALLANT RD, C898

City  
SANTA BARBARAState  
CAZip Code  
93105-4839FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

708.28

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699793**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3792 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, JOHN, BOFINGER, MR., JR.**

Mailing Address 2456 HANOVER WEST TER NW

City  
ATLANTAState  
GAZip Code  
30327-1126FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701151**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700919**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701591**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

295.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3793 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MITCHELL, RAYMOND, , ,**

Mailing Address 3717 DEL PRADO BLVD

City  
CAPE CORALState  
FLZip Code  
33904-7144FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699270**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOLLOY, JOHN, , ,**

Mailing Address 36 PATIKY STREET

City  
KINGS PARKState  
NYZip Code  
11754-1902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701206**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOORE, SUSAN, , ,**

Mailing Address 70 BROOKS ROAD

City  
LONGMEADOWState  
MAZip Code  
01106-2129FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

335.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701477**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

240.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3794 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORGAN, TOM, , ,**

Mailing Address 19226 66TH AVE SOUTH L-108

City  
KENTState  
WAZip Code  
98032-2121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MORGAN PARTNERSOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699418**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699871**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699874**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3795 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699875

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699880

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699884

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3796 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699889**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699893**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699898**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.36



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3797 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUELLER, JUDY, , ,**

Mailing Address 20906 W SNOWBERRY LN

City  
PLAINFIELDState  
ILZip Code  
60544-7495FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.95

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700548**

Amount of Each Receipt this Period

10.86

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURPHY, STANWOOD, , , JR.**

Mailing Address POB 249

City  
FORTUNAState  
CAZip Code  
95540-0249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.84

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699645**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NAKOFF, MICHAEL, H., MR.,**

Mailing Address 341 COLUMBUS AVE

City  
BATESVILLEState  
INZip Code  
47006-4313FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

630.50

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700130**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

147.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3798 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, EDWARD, , ,**

Mailing Address 8830 MCAVOY DR.

City  
HOUSTONState  
TXZip Code  
77074-7310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.08

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699946**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, PAUL, , ,**

Mailing Address 6803 NORTH 68TH PLAZA

City  
OMAHAState  
NEZip Code  
68152-2177FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.18

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.276999363**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEVES, DALE, , ,**

Mailing Address 2711 EL PASO AVE

City  
SNYDERState  
TXZip Code  
79549-2436FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.79

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699977**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3799 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEVES, RICHARD, , ,**

Mailing Address 737 DANE CT

City  
HEMETState  
CAZip Code  
92543-1785FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699891

Amount of Each Receipt this Period

80.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEWCOMB, JULIE, , ,**

Mailing Address 11986 NORTH 83RD PLACE

City

SCOTTSDALE

State

AZ

Zip Code

85260-5682

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SALES AND MARKETING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700139

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NGUYEN, DICHSON, , ,**

Mailing Address 15300 MAGNOLIA ST. SPC.53

City

WESTMINSTER

State

CA

Zip Code

92683-6425

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700876

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

80.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3800 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NGUYEN, TOAN, , ,**

Mailing Address 472 ILCREST DR.

City  
HOUSTONState  
TXZip Code  
77042-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699909**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NICHOLS, PHIL, , ,**

Mailing Address 407 WEST CORNELL STREET

City  
AVON PARKState  
FLZip Code  
33825-3700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1266.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699313**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NICHOLS, PHIL, , ,**

Mailing Address 407 WEST CORNELL STREET

City  
AVON PARKState  
FLZip Code  
33825-3700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1266.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701445**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.05

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3801 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NICOSON, JON, , ,**

Mailing Address 2075 W CR100S

City  
CORY

State  
IN

Zip Code  
47846-8026

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NICOSON FARMS INC

Occupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.74

Date of Receipt

02 / 18 / 2025

**Transaction ID : SA11A.27700681**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NICOSON, JON, , ,**

Mailing Address 2075 W CR100S

City  
CORY

State  
IN

Zip Code  
47846-8026

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NICOSON FARMS INC

Occupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.74

Date of Receipt

02 / 18 / 2025

**Transaction ID : SA11A.27700717**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NOBLE, CRISTINA, HEEREN, ,**

Mailing Address 1200 FIFTH AVENUE

City  
NEW YORK

State  
NY

Zip Code  
10029-5208

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1168.54

Date of Receipt

02 / 18 / 2025

**Transaction ID : SA11A.27699873**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

442.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3802 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOWLIN, CHARLES, , ,**Mailing Address 2900 REDMONT PARK CIR  
APT 400City  
BIRMINGHAMState  
ALZip Code  
35205-2155FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NOWLIN ASSOCIATESOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699566**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NUCKOLS, GAIL, , MS.,**

Mailing Address 13144 RD.216

City  
PORTERVILLEState  
CAZip Code  
93257-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GAIL NUCKOLSOccupation (for Individual)  
CATER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701466**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

589.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700595**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3803 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

589.96

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700690**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O'FLYNN, ARMINDA, , ,**

Mailing Address 12864 BISCAYNE BLVD

City  
N. MIAMIState  
FLZip Code  
33181-2007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

992.53

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701040**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OAK, ALAN, , MR.,**

Mailing Address 5104 BONHAM RD

City  
OXFORDState  
OHZip Code  
45056-3606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

471.83

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701107**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3804 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLNEY, LINDA, , ,**

Mailing Address PO BOX 194

City  
PRIDES CROSSINGState  
MAZip Code  
01965-0194FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2025

**Transaction ID : SA11A.27699298**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, SHARON, , ,**

Mailing Address 1239 O'LEARY DRIVE

City  
JOLIETState  
ILZip Code  
60431-8954FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.21

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2025

**Transaction ID : SA11A.27701438**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLSON, SHARON, , ,**

Mailing Address 1239 O'LEARY DRIVE

City  
JOLIETState  
ILZip Code  
60431-8954FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.21

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2025

**Transaction ID : SA11A.27701441**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3805 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLSON, SHARON, , ,**

Mailing Address 1239 O'LEARY DRIVE

City  
JOLIETState  
ILZip Code  
60431-8954FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701443

Amount of Each Receipt this Period

20.57

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, SHARON, , ,**

Mailing Address 1239 O'LEARY DRIVE

City  
JOLIETState  
ILZip Code  
60431-8954FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701444

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLSON, SHARON, , ,**

Mailing Address 1239 O'LEARY DRIVE

City  
JOLIETState  
ILZip Code  
60431-8954FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701448

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3806 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OWEN, JAMES, , ,**

Mailing Address 254 MEYERMAN RD

City  
OWEGOState  
NYZip Code  
13827-6744FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VERIZONOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701645**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OWENS, JAMES, , ,**

Mailing Address 132 ALRODO DR

City  
GILBERTState  
SCZip Code  
29054-9694FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CDIOccupation (for Individual)  
SUPPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700341**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PALAZA, MADELEINE, , ,**

Mailing Address 69 KING ST.

City  
STOUGHTONState  
MAZip Code  
02072-3820FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

599.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700046**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3807 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, TERRY, A., MR.,**

Mailing Address 6210 PLOVERMEADOW STREET

City  
LITHIAState  
FLZip Code  
33547-4366FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.90

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699853**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701390**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701391**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3808 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701392

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701395

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701582

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

18.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3809 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701583

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701584

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701585

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3810 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701586**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701587**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701588**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3811 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701589

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PELC, ANTOINETTE, , ,**

Mailing Address 650 15TH AVENUE SOUTH

City  
NAPLESState  
FLZip Code  
34102-7441FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PELCONCEPTS INCOccupation (for Individual)  
DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701517

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PELLETIER, DOLORES, , ,**

Mailing Address 18 NELBERTH TERRACE

City  
HYANNISState  
MAZip Code  
02601-4732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701568

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

172.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3812 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETITJEAN, SANDRA, , ,**

Mailing Address 6832 TAMARA LANE

City  
ASSARIAState  
KSZip Code  
67416-8875FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.41

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699308**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHILLIPS, KAREN, , ,**

Mailing Address 13888 STATE ROAD 32 EAST

City  
NOBLESVILLEState  
INZip Code  
46060-8858FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.35

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701328**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PISTORINO, MARIA, , MS.,**

Mailing Address 6535 SW 123RD STREET

City  
PINECRESTState  
FLZip Code  
33156-5554FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

983.11

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701407**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.62



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3813 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PLACA, ALAN, , ,**

Mailing Address 200 EAGLETON ESTATE BLVD

City  
PALM BEACH GARDENSState  
FLZip Code  
33418-8411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIULIANI PARTNERS LLCOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.94

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701470**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POELZING, DIETMAR, G., ,**

Mailing Address 1947 FORTSTONE LN

City  
COLUMBUSState  
OHZip Code  
43228-3876FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.23

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700459**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POELZING, DIETMAR, G., ,**

Mailing Address 1947 FORTSTONE LN

City  
COLUMBUSState  
OHZip Code  
43228-3876FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.23

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700462**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3814 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POHLE, CORTLAND, , ,**

Mailing Address 614 TATTLESBURY DR

City  
CONWAYState  
SCZip Code  
29526-2652FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699585**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POHUSKI, LINDA, , ,**

Mailing Address 396 NORTH SHORE ROAD

City  
PASADENAState  
MDZip Code  
21122-5308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700043**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POMEROY, PATTI, , ,**

Mailing Address 902 SILVER ST

City  
PRINCETONState  
TXZip Code  
75407-2281FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.27

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701549**

Amount of Each Receipt this Period

18.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

172.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3815 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PREMO, TERRY, , ,**

Mailing Address 1409 EVERGREEN PARK DR. SW - 301

City  
OLYMPIAState  
WAZip Code  
98502-5827FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700161**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRESTON, DAVID, LLOYD, MR.,**

Mailing Address 3835 W WOODSIDE AVE

City  
VISALIAState  
CAZip Code  
93291-5563FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SAFETY STRIPING SERVICE, INCOccupation (for Individual)  
PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.75

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699512**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PUGH, ROBERT, J., MR.,**

Mailing Address 9609 RED BUD TREE LN

City  
SAINT LOUISState  
MOZip Code  
63122-6551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700706**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

205.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3816 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PUGH, ROBERT, J., MR.,**

Mailing Address 9609 RED BUD TREE LN

City  
SAINT LOUISState  
MOZip Code  
63122-6551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700711**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RATCHFORD, HERMAN, , ,**

Mailing Address 838 OATES RD

City  
BESSEMER CITYState  
NCZip Code  
28016-7572FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SOUTHWOOD REALTY COMPANYOccupation (for Individual)  
APARTMENT OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701494**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701546**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3817 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701548**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699859**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699861**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.98

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3818 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REAGAN, RONALD, C., ,**

Mailing Address 1783 FOUR MILE COVE PKWY

City  
CAPE CORAL

State  
FL

Zip Code  
33990-2409

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.95

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27700842**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REISS, CLAIRE, K., MRS.,**

Mailing Address 464 PROSPECT STREET  
UNIT 501

City  
LA JOLLA

State  
CA

Zip Code  
92037-4742

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1431.74

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27699619**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REISS, CLAIRE, K., MRS.,**

Mailing Address 464 PROSPECT STREET  
UNIT 501

City  
LA JOLLA

State  
CA

Zip Code  
92037-4742

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1431.74

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27699623**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

102.05

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3819 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICH, JULIE, , ,**

Mailing Address 13700 SKYLINE CIRCLE

City  
SHAKOPEE

State  
MN

Zip Code  
55379-9382

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
PROPERTY OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

**Transaction ID : SA11A.27699287**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLE

State  
NC

Zip Code  
28311-7675

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

**Transaction ID : SA11A.27700233**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLE

State  
NC

Zip Code  
28311-7675

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

**Transaction ID : SA11A.27700240**

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

265.45

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3820 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RISH, NELSON, W., MR.,**

Mailing Address 13374 E CANNON DR.

City  
SCOTTSDALEState  
AZZip Code  
85259-5406FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700338**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RITTER, ANN, W., MS.,**

Mailing Address 2551 PALOMINO DR.

City  
CAPE GIRARDEAUState  
MOZip Code  
63701-1958FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1805.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700184**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBERTS, GARY, D., MR.,**

Mailing Address 6206 APPIAN WAY

City  
RIVERSIDEState  
CAZip Code  
92506-4555FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699718**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

464.35



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3821 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBERTSON, ZANNA, , ,**

Mailing Address 1159 MOUNTAIN RD

City  
KEMPTONState  
PAZip Code  
19529-9370FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KEMPTON NEW CHURCHOccupation (for Individual)  
TEACHERS AIDE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699264**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBERTSON, ZANNA, , ,**

Mailing Address 1159 MOUNTAIN RD

City  
KEMPTONState  
PAZip Code  
19529-9370FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KEMPTON NEW CHURCHOccupation (for Individual)  
TEACHERS AIDE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701238**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODACK, MARK, , ,**Mailing Address 16051 COLLINS AVE  
3502City  
NORTH MIAMI BEACHState  
FLZip Code  
33160-4624FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

782.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700818**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3822 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700314

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROGERS, MARCY, , ,**

Mailing Address 4625 BELVISTA COURT

City  
SAN DIEGOState  
CAZip Code  
92130-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL CONSULTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701637

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROUSE, EPIFANIA, , ,**Mailing Address 7862 SAILBOAT KEY BLVD S  
501City  
SOUTH PASADENAState  
FLZip Code  
33707-6359FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700366

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3823 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROUSE, EPIFANIA, , ,**Mailing Address 7862 SAILBOAT KEY BLVD S  
501City  
SOUTH PASADENAState  
FLZip Code  
33707-6359FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700394**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700342**

Amount of Each Receipt this Period

2.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699600**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3824 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVERState  
NJZip Code  
08882-1908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699261**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVERState  
NJZip Code  
08882-1908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700547**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUTTER, JOSEPH, G., MR., USAF RET**

Mailing Address 2250 GOVERNORS BEND RD SE

City  
HUNTSVILLEState  
ALZip Code  
35801-1371FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

422.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700211**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3825 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SALAT, ERIC, , ,**

Mailing Address 14 HORATIO STREET  
5D

City  
NEW YORK

State  
NY

Zip Code  
10014-1666

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.40

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27701384**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANCHEZ, GABRIEL, , ,**

Mailing Address 14912 TEMPLAR DR

City  
LA MIRADA

State  
CA

Zip Code  
90638-3820

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.11

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27700266**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANCHEZ, GABRIEL, , ,**

Mailing Address 14912 TEMPLAR DR

City  
LA MIRADA

State  
CA

Zip Code  
90638-3820

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

283.11

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27700274**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

92.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3826 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANCHEZ, GABRIEL, , ,**

Mailing Address 14912 TEMPLAR DR

City  
LA MIRADAState  
CAZip Code  
90638-3820FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700278

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANCHEZ, THOMAS, , ,**

Mailing Address 12140 BEATY AVE

City  
NORWALKState  
CAZip Code  
90650-1923FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699993

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANCHEZ, THOMAS, , ,**

Mailing Address 12140 BEATY AVE

City  
NORWALKState  
CAZip Code  
90650-1923FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

345.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700868

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

87.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3827 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHATTYN, JOHN, , MR.,**

Mailing Address 129 CROCKETT DR.

City  
KERRVILLEState  
TXZip Code  
78028-8114FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700070

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHATTYN, JOHN, , MR.,**

Mailing Address 129 CROCKETT DR.

City  
KERRVILLEState  
TXZip Code  
78028-8114FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700202

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHATTYN, JOHN, , MR.,**

Mailing Address 129 CROCKETT DR.

City  
KERRVILLEState  
TXZip Code  
78028-8114FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1214.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700290

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

88.49

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3828 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLESINGER, KATHIE, , ,**

Mailing Address 2840 EARLSWOOD ROAD

City  
MIDLOTHIANState  
VAZip Code  
23113-2207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700705**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699973**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHOENHALS, RICHARD, , ,**

Mailing Address P.O. BOX 2075

City  
WEATHERFORDState  
OKZip Code  
73096-8075FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROSSPOINTE CHURCHOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

715.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700334**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

142.22



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3829 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHOENHALS, RICHARD, , ,**

Mailing Address P.O. BOX 2075

City  
WEATHERFORD

State  
OK

Zip Code  
73096-8075

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CROSSPOINTE CHURCH

Occupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.35

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27700344**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHRAM, CHARLES, , ,**

Mailing Address 14816 WEST HURON DRIVE

City  
SUN CITY WEST

State  
AZ

Zip Code  
85375-5988

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.52

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27699430**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHRAGE, MIKE, , ,**

Mailing Address 21262 MULHOLLAND DR

City  
WOODLAND HILLS

State  
CA

Zip Code  
91364-5919

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27700750**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

286.28

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3830 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, JOAN, C., MS.,**

Mailing Address 5094 TEN MILE PL.

City  
CASTLE ROCK

State  
CO

Zip Code  
80108-8837

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.53

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27701094**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEITER, JOHN, H., MR.,**

Mailing Address 3293 PADARO LN

City  
CARPINTERIA

State  
CA

Zip Code  
93013-1116

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1166.96

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27699388**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SERIO, THOMAS, , ,**

Mailing Address 20981 COASTVIEW LN

City  
HUNTINGTON BEACH

State  
CA

Zip Code  
92648-5271

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CEO

Occupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.18

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27701575**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3831 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHAUGHNESSY, KATHLEEN, , ,**

Mailing Address 182 BURNT HICKORY WAY

City  
FORTSONState  
GAZip Code  
31808-4468FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.87

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700235**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHAW, JERRY, , ,**

Mailing Address HC79 BOX 3712

City  
SAHUARITAState  
AZZip Code  
85629-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.42

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699288**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHAYS, LORRAINE, , ,**

Mailing Address 14659 CANALVIEW DRIVE APT A

City  
DELRAY BEACHState  
FLZip Code  
33484-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.21

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699348**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3832 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHEDLOCK, JOHN, , ,**

Mailing Address 10089 IRON MOUNTAIN CT

City  
RANCHO CUCAMONGA

State  
CA

Zip Code  
91737-6831

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.50

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27699680**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHERROD, CLIFFORD, , ,**

Mailing Address 28900 SOUTH SONCY ROAD

City  
CANYON

State  
TX

Zip Code  
79015-6420

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27701737**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTIN

State  
TX

Zip Code  
78739-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27699449**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

58.45

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3833 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699454

Amount of Each Receipt this Period

44.18

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700140

Amount of Each Receipt this Period

44.18

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700771

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

97.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3834 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700773

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700776

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700778

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3835 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700783**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHUFF, MARGARET, , ,**Mailing Address 750 S OCEAN BLVD  
2NO

City

BOCA RATON

State  
FLZip Code  
33432-6360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JES PUBLISHINGOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.30

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700886**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SINCLAIR, PATRICIA, N., MRS.,**

Mailing Address 1739 N TULARE WAY

City

UPLAND

State  
CAZip Code  
91784-1961FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.39

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699625**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3836 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINCLAIR, PATRICIA, N., MRS.,**

Mailing Address 1739 N TULARE WAY

City  
UPLANDState  
CAZip Code  
91784-1961FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.39

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699652**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SINTIM-DAMOA, KWABENA, , ,**

Mailing Address 30 EMPRESS CT

City  
FREEHOLDState  
NJZip Code  
07728-4304FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.22

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701263**

Amount of Each Receipt this Period

47.89

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMALLWOOD, MARJORIE, , MS.,**

Mailing Address 2315 ATTALA ROAD 3121

City  
VAIDENState  
MSZip Code  
39176-9549FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

286.09

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701050**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.68



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3837 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSON

State  
MO

Zip Code  
64831-9895

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.30

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27699764**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSON

State  
MO

Zip Code  
64831-9895

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.30

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27700249**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSON

State  
MO

Zip Code  
64831-9895

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

614.30

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27700667**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

36.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3838 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNAVELY, MICHAEL, W., MR., SR.**

Mailing Address 67928 US HWY 33

City  
GOSHENState  
INZip Code  
46526-8549FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699604**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SODITUS, CONSTANCE, A., ,**

Mailing Address 21608 O. LANE. APT. 116

City  
OCEAN PARKState  
WAZip Code  
98640-3225FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.70

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700958**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLTYSIAK, CAROL, , ,**

Mailing Address 12120 NE 234TH ST

City  
ARCADIAState  
OKZip Code  
73007-9010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.43

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701301**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

157.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3839 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOLTYSIAK, CAROL, , ,**

Mailing Address 12120 NE 234TH ST

City  
ARCADIAState  
OKZip Code  
73007-9010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701369**

Amount of Each Receipt this Period

52.1

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699480**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPAETH, EDMUND, , ,**

Mailing Address 26536 LOVE LN

City  
RAMONAState  
CAZip Code  
92065-4822FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

499.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700586**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3840 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPEIGHT, CAROL, E., ,**

Mailing Address 1421 HWY 641 SOUTH

City  
PARISState  
TNZip Code  
38242-6750FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700400**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STANLEY, NORVAL, , MS., III**

Mailing Address P.O. BOX 3018

City  
ACUSHNETState  
MAZip Code  
02743-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BERGIES SEAFOODOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701348**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701359**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3841 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEINBERG, JACLYN, , ,**

Mailing Address 16499 SENTERRA DR

City  
DELRAY BEACHState  
FLZip Code  
33484-6955FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701603

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, STANLEY, S., MR.,**

Mailing Address 5744 REPUBLIC OF TEXAS BLVD

City  
AUSTINState  
TXZip Code  
78735-6512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701635

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STIFEL, JOHN, , ,**

Mailing Address 2253 DEBLIN DR.

City  
CINCINNATIState  
OHZip Code  
45239-5609FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

329.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701268

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

127.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3842 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STILLWELL, KAREN, , ,**

Mailing Address 59501 414TH LANE

City  
NEW ULMState  
MNZip Code  
56073-4220FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700101

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STUBBLEFIELD, DOTTIE, , ,**

Mailing Address 1265 CHARTRES

City  
KAUFMANState  
TXZip Code  
75142-4473FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699814

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STUBBLEFIELD, DOTTIE, , ,**

Mailing Address 1265 CHARTRES

City  
KAUFMANState  
TXZip Code  
75142-4473FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

328.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699817

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3843 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STUBBLEFIELD, DOTTIE, , ,**

Mailing Address 1265 CHARTRES

City  
KAUFMANState  
TXZip Code  
75142-4473FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699819

Amount of Each Receipt this Period

7.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STUBBLEFIELD, DOTTIE, , ,**

Mailing Address 1265 CHARTRES

City  
KAUFMANState  
TXZip Code  
75142-4473FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699822

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STUBBLEFIELD, DOTTIE, , ,**

Mailing Address 1265 CHARTRES

City  
KAUFMANState  
TXZip Code  
75142-4473FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

328.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699906

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3844 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STURGILL, LARRY, , ,**

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699594**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700350**

Amount of Each Receipt this Period

49.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUDLIK, DANIEL, , ,**

Mailing Address 18 LIMESTONE RD

City  
ARMONKState  
NYZip Code  
10504-2305FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699621**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3845 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUDLIK, DANIEL, , ,**

Mailing Address 18 LIMESTONE RD

City  
ARMONKState  
NYZip Code  
10504-2305FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699644**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUDOL, JEAN, , ,**

Mailing Address 2640 GATELY DRIVE WEST

City  
WEST PALM BEACHState  
FLZip Code  
33415-7996FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701193**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SULLIVAN, CINDY, M., ,**

Mailing Address 575 SIMPSON HWY 540

City  
MENDENHALLState  
MSZip Code  
39114-9065FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.51

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701122**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3846 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SULLIVAN, CINDY, M., ,**

Mailing Address 575 SIMPSON HWY 540

City  
MENDENHALLState  
MSZip Code  
39114-9065FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.51

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

Transaction ID : SA11A.27701125

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SULLIVAN, CINDY, M., ,**

Mailing Address 575 SIMPSON HWY 540

City  
MENDENHALLState  
MSZip Code  
39114-9065FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.51

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

Transaction ID : SA11A.27701126

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SULLIVAN, CINDY, M., ,**

Mailing Address 575 SIMPSON HWY 540

City  
MENDENHALLState  
MSZip Code  
39114-9065FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.51

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

Transaction ID : SA11A.27701129

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.12

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3847 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SULLIVAN, CINDY, M., ,**

Mailing Address 575 SIMPSON HWY 540

City  
MENDENHALL

State  
MS

Zip Code  
39114-9065

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.51

Date of Receipt

02 / 18 / 2025

**Transaction ID : SA11A.27701131**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SULLIVAN, CINDY, M., ,**

Mailing Address 575 SIMPSON HWY 540

City  
MENDENHALL

State  
MS

Zip Code  
39114-9065

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.51

Date of Receipt

02 / 18 / 2025

**Transaction ID : SA11A.27701134**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SURPRENANT, LINDA, , ,**

Mailing Address 1016 FREEDOM LANE

City  
AUBREY

State  
TX

Zip Code  
76227-2107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

02 / 18 / 2025

**Transaction ID : SA11A.27700916**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

51.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3848 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TABIB, GABRIEL, , ,**

Mailing Address 9819 E ROADRUNNER DR.

City  
SCOTTSDALEState  
AZZip Code  
85262-1435FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
EXPORTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699408**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THERRIEN, WILLIAM, G., MR.,**

Mailing Address 8 ELK RIDGE ROAD

City  
CALIFONState  
NJZip Code  
07830-4112FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699685**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, BONNIE, , ,**

Mailing Address 115 HOLBROOK DR.

City  
HUNTSVILLEState  
ALZip Code  
35806-4084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

512.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700747**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

279.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3849 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THRASHER, MICHAEL, , ,**

Mailing Address 153 COVENTRY LAKE DRIVE

City  
LEXINGTONState  
SCZip Code  
29072-2761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GUARDIAN FENCE, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2025

**Transaction ID : SA11A.27700136**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THRASHER, MICHAEL, , ,**

Mailing Address 153 COVENTRY LAKE DRIVE

City  
LEXINGTONState  
SCZip Code  
29072-2761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GUARDIAN FENCE, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2025

**Transaction ID : SA11A.27700145**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TIFFAN, GERALD, L., ,**

Mailing Address 1061 GALLEON DRIVE

City  
NAPLESState  
FLZip Code  
34102-7705FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2025

**Transaction ID : SA11A.27701312**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3850 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TOBEN, DENNIS, , ,**

Mailing Address 19501 40TH AVENUE WEST #545

City  
LYNNWOODState  
WAZip Code  
98036-5799FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700495**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TORRES, JOHN, , ,**

Mailing Address 8501 ELIOT AVE

City  
REGO PARKState  
NYZip Code  
11374-2737FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.43

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700196**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRUCHAN, JORDAN, , ,**

Mailing Address 24 DOCKSIDE LANE #432

City  
KEY LARGOState  
FLZip Code  
33037-5267FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

219.38

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700509**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3851 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TUKE, THOMAS, , ,**

Mailing Address 19 HAYFIELD WAY

City  
PITTSFORDState  
NYZip Code  
14534-4621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700333**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700165**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701286**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3852 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701367

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TURNOCK, JANE, KENDALL, ,**

Mailing Address 6501 E LASALLE PLACE

City  
DENVERState  
COZip Code  
80224-2620FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORVELOccupation (for Individual)  
R.N.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699332

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. UMBARGER, BRENDA, L., ,**

Mailing Address P.O. BOX 1774

City  
FRITCHState  
TXZip Code  
79036-1774FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

880.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700038

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

154.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3853 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UMBARGER, BRENDA, L., ,**

Mailing Address P.O. BOX 1774

City  
FRITCHState  
TXZip Code  
79036-1774FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701518

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. UNDERWOOD, BARBARA, , ,**

Mailing Address 700 CRESTVIEW DRIVE

City  
WOOD RIVERState  
ILZip Code  
62095-3378FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699373

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VALDIVIA, MARIA, , ,**

Mailing Address 30 EAST 64TH HIALEAH

City  
HIALEAHState  
FLZip Code  
33013-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

374.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700589

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

114.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3854 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN AMERONGEN, LEWIS, W., MR.,**

Mailing Address 509 MADISON AVE FL 23

City  
NEW YORKState  
NYZip Code  
10022-5512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699841**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699732**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VERPLANK, JOEL, , MR.,**

Mailing Address 9212 TURTLE POINT DR.

City  
KILLENState  
ALZip Code  
35645-2854FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VERPLANK ENTERPRISESOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

298.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700648**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

301.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 3855 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VIDAL, MILLIE, , ,**

Mailing Address 280 ACACIA AVE

City  
SAN BRUNOState  
CAZip Code  
94066-4845FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699587

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VILLABONA, MARTHA, , ,**

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMIState  
FLZip Code  
33143-8048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699807

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VINING, SARA, , ,**Mailing Address 2825 CARTER RD  
UNIT 117City  
SUMTERState  
SCZip Code  
29150-1733FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701525

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

111.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3856 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699495**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WADDELL, JENETTA, , ,**

Mailing Address PO BOX 215

City  
TUSCUMBIAState  
ALZip Code  
35674-0215FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BLUE MOUNTAIN CHRISTIAN UNIVERSITYOccupation (for Individual)  
DEAN, SCHOOL OF EDUCATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

643.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701066**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALBERG, JAIMIE, , ,**

Mailing Address 7040 WELLS FARGO WAY

City  
CORNINGState  
CAZip Code  
96021-9009FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WALBERG INC.Occupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700441**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.08

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3857 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALBERG, JAIMIE, , ,

Mailing Address 7040 WELLS FARGO WAY

City  
CORNINGState  
CAZip Code  
96021-9009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALBERG INC.Occupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701209

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKINGTON, PAT, , ,

Mailing Address 11765 N 135TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-3633FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700253

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALKINGTON, PAT, , ,

Mailing Address 11765 N 135TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-3633FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

718.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700262

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

117.46

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3858 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALKINGTON, PAT, , ,

Mailing Address 11765 N 135TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-3633FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27700280

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALLACE, JAMES, , , III

Mailing Address 2862 DRUID HILL DRIVE

City  
DES MOINESState  
IAZip Code  
50315-1845FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699720

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WARNOCK, DAN, , ,

Mailing Address 11684 HUCKLEBERRY LOOP

City  
BAKER CITYState  
ORZip Code  
97814-7793FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

412.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699669

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

364.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3859 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEHMAN, JOAN, , ,

Mailing Address 831 HICKORY KNOB CIRCLE

City  
CEDAR HILLState  
TXZip Code  
75104-7803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1670.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27699823

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEHMAN, JOAN, , ,

Mailing Address 831 HICKORY KNOB CIRCLE

City  
CEDAR HILLState  
TXZip Code  
75104-7803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1670.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701222

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEHMAN, JOAN, , ,

Mailing Address 831 HICKORY KNOB CIRCLE

City  
CEDAR HILLState  
TXZip Code  
75104-7803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1670.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701595

Amount of Each Receipt this Period

156.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

364.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3860 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEIGAND, CRAIG, , MR.,**

Mailing Address 2289 S ISABELL ST

City  
LAKEWOODState  
COZip Code  
80228-6460FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700408**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699930**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700072**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3861 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHEELER, BRUCE, , ,**

Mailing Address 7800 SOUTHWEST PARKWAY

City  
AUSTIN

State  
TX

Zip Code  
78735-6113

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.83

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27701723**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHEELER, MIEKA, L., ,**

Mailing Address 27230 STONEY BROOK DR

City  
TRENTON

State  
MI

Zip Code  
48183-4640

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.05

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27701555**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITE, ANN, , ,**

Mailing Address 25 MAX LANE DR.

APT 234

City  
JACKSON

State  
TN

Zip Code  
38305-2864

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.94

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11A.27700534**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

72.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3862 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITE, STEPHEN, , ,**

Mailing Address 9345 OSAGE CIRCLE

City  
GARDEN RIDGE

State  
TX

Zip Code  
78266-2060

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.53

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27700061**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITTAKER, JERRY, , ,**

Mailing Address 45 CRABLINE COURT

City  
HILTON HEAD

State  
SC

Zip Code  
29928-3539

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.59

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27701350**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITTAKER, JERRY, , ,**

Mailing Address 45 CRABLINE COURT

City  
HILTON HEAD

State  
SC

Zip Code  
29928-3539

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.59

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025

**Transaction ID : SA11A.27701616**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

66.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3863 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILHELM, JOSEPH, L., MR.,**

Mailing Address 884 PEBBLEBROOK LANE

City  
EAST LANSINGState  
MIZip Code  
48823-2164FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27701644**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, CLARK, , ,**

Mailing Address 4532 GOLF RIDGE DRIVE

City  
ELKTONState  
FLZip Code  
32033-4010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700823**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMSON, GARY, , ,**

Mailing Address 817 WEST FRONT STREET

City  
SEALYState  
TXZip Code  
77474-3422FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

417.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700598**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3864 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMSON, GARY, , ,**

Mailing Address 817 WEST FRONT STREET

City  
SEALYState  
TXZip Code  
77474-3422FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.50

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700709**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, MARGARET, A., MS.,**

Mailing Address 2005 ARTHUR LANE

City  
AUSTINState  
TXZip Code  
78704-3235FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IC2, UT AUSTINOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.74

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700053**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, RITA, , MS.,**

Mailing Address 2492 STAG RUN BLVD.

City  
CLEARWATERState  
FLZip Code  
33765-1832FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700795**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3865 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINCHESTER, JANE, A., MS.,**

Mailing Address 18 MEADOW LN

City  
GREENFIELDState  
MAZip Code  
01301-9702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700482**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINTERS, KENNETH, C., MR.,**

Mailing Address 29840 THUNDERPAW DR

City  
HARVESTState  
ALZip Code  
35749-6523FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699503**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOLCOTT, BERNARD, , ,**

Mailing Address 603 DABNEYS RD.

City  
RAPHINEState  
VAZip Code  
24472-2815FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699527**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3866 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOOD, LOCKETT, E., MR.,**

Mailing Address 21 S SUNSET ST

City  
LONGMONTState  
COZip Code  
80501-5843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AVIVID WATER TECHNOLOGYOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699908**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODHOUSE, MARILYN, M., MRS.,**

Mailing Address 650 RAMBLEWOOD RD.

City  
HOUSTONState  
TXZip Code  
77079-6905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2197.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27700844**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WORSDELL, TERRY, , ,**

Mailing Address 1840 PARK NEWPORT DRIVE, #201

City  
NEWPORT BEACHState  
CAZip Code  
92660-5054FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11A.27699844**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3867 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701347**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WYANDT, YON, , ,**

Mailing Address 3739 SPRING COULEE RD

City  
BELLINGHAMState  
WAZip Code  
98226-8887FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.12

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699265**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YOSHIMOTO, MYLES, , ,**

Mailing Address 91-1321 KINOIKI STREET

City  
KAPOLEIState  
HIZip Code  
96707-4106FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.29

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27700097**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3868 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNG, PATRICIA, , ,**

Mailing Address 9940 PREMIERE VIEW CIR

City  
HAGERSTOWNState  
MDZip Code  
21740-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.42

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701421**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZELLMER, GENE, , ,**

Mailing Address 25845 S. CARMEL HILLS DR.

City  
CARMELState  
CAZip Code  
93923-8310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.61

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27699291**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZELLMER, GENE, , ,**

Mailing Address 25845 S. CARMEL HILLS DR.

City  
CARMELState  
CAZip Code  
93923-8310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

366.61

Date of Receipt

MM / DD / YYYY  
02 / 18 / 2025**Transaction ID : SA11A.27701731**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3869 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZELLMER, GENE, , ,**

Mailing Address 25845 S. CARMEL HILLS DR.

City  
CARMELState  
CAZip Code  
93923-8310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA11A.27701736

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11C.27702479

Amount of Each Receipt this Period

65754.08

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704448

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

12.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3870 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ABBE, ROSS, E., MR.,

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704456

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ABBOTT, KENNETH, , ,

Mailing Address 78 HICKORY LN

City  
GREENVILLEState  
KYZip Code  
42345-4105FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702521

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ABBOTT, KENNETH, , ,

Mailing Address 78 HICKORY LN

City  
GREENVILLEState  
KYZip Code  
42345-4105FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

328.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702525

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

37.93

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3871 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABUID, JULIA, , ,**

Mailing Address P.O. BOX 921495

City  
SYLMAR

State  
CA

Zip Code  
91392-1495

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27704443**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAIR, STEFAN, , DR.,**

Mailing Address 8591 SKYLINE DR.

City  
LOS ANGELES

State  
CA

Zip Code  
90046-1042

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27702714**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMSON, BETTY, , ,**

Mailing Address 554 W 1660 N

City  
WASHINGTON

State  
UT

Zip Code  
84780-8576

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.18

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27704101**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

74.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3872 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADAMS, SCARLETT, , ,**Mailing Address P.O. BOX 6880, 124 HARLESTON GREEN  
#44City  
SNOWMASS VILLAGEState  
COZip Code  
81615-6880FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROWN CHOCOLATEOccupation (for Individual)  
MARKETING EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.05

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704354**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADKINS, JANET, , ,**

Mailing Address 3301 JENNINGS DRIVE

City  
SPRINGFIELDState  
ILZip Code  
62704-5536FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.50

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704170**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADKINS, JANET, , ,**

Mailing Address 3301 JENNINGS DRIVE

City  
SPRINGFIELDState  
ILZip Code  
62704-5536FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.50

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704187**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3873 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AGUILAR, LUIS, G., ,**

Mailing Address 7322 NW 122 CRT

City  
MIAMIState  
FLZip Code  
33178-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702960**

Amount of Each Receipt this Period

235.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALIOTA, PAULETTE, , ,**

Mailing Address 538 MARGO COURT

City  
ERIEState  
PAZip Code  
16505-2112FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702630**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703357**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

271.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3874 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMS, SONJA, , ,**

Mailing Address 27441 N. BLACK CANYON HWY, UNIT 70

City  
PHOENIXState  
AZZip Code  
85085-0016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COUNTRY CLUBOccupation (for Individual)  
ENERGY HEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.18

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702841**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMS, SONJA, , ,**

Mailing Address 27441 N. BLACK CANYON HWY, UNIT 70

City  
PHOENIXState  
AZZip Code  
85085-0016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COUNTRY CLUBOccupation (for Individual)  
ENERGY HEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.18

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702843**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMS, SONJA, , ,**

Mailing Address 27441 N. BLACK CANYON HWY, UNIT 70

City  
PHOENIXState  
AZZip Code  
85085-0016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COUNTRY CLUBOccupation (for Individual)  
ENERGY HEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.18

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702848**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3875 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDROS, ANN, , ,**

Mailing Address P O BOX 3651

City  
CARMEL BY THE SEAState  
CAZip Code  
93921-3651FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703620**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARTHUR, GEORGE, , ,**

Mailing Address 7 N. RIVER RD

City  
NASHUAState  
MTZip Code  
59248-9122FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703608**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAIRD, CLIFFORD, , ,**

Mailing Address 1750 NEWTON ROAD

City  
FERRISState  
TXZip Code  
75125-9464FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MODERN SYSTEMS INCOccupation (for Individual)  
PRO MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

548.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703545**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

181.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3876 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BALDWIN, JAMES, , MR.,**

Mailing Address 9 MAURA LANE

City  
DANBURYState  
CTZip Code  
06810-7118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.65

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704009**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARBER, WILLIAM, , ,**

Mailing Address 408 COLLEGE AVE

City  
WEST CHESTERState  
PAZip Code  
19382-3556FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BUCKEYE PARTNERSOccupation (for Individual)  
PIPELINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.34

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704099**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BATTISTONI, RICHARD, , ,**

Mailing Address 40543 EYOTA CT

City  
MURRIETAState  
CAZip Code  
92562-5884FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COSTCO WHOLESALEOccupation (for Individual)  
RETAIL MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703651**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

159.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3877 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEACH, JEAN ANN, , ,**

Mailing Address 109 COVE CIR

City  
MONTGOMERYState  
TXZip Code  
77356-8845FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.41

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703425**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEACH, JEAN ANN, , ,**

Mailing Address 109 COVE CIR

City  
MONTGOMERYState  
TXZip Code  
77356-8845FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.41

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703433**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEALL, JAMES, , ,**

Mailing Address 5267 TIMBER RACE COURSE

City  
HOLLYWOODState  
SCZip Code  
29449-8503FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.10

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702653**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

312.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3878 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERLIN, STEVEN, , ,**

Mailing Address 12407 DOVER RD

City  
REISTERSTOWNState  
MDZip Code  
21136-5607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703019**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERNDT, SCOTT, , ,**

Mailing Address 3418 254TH LN

City  
LAKESIDEState  
NEZip Code  
69351-5108FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BERNDT CATTLE COOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703932**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERRY, JOHN, , ,**

Mailing Address 15825 OLD OLEANDER DR

City  
CHARLOTTEState  
NCZip Code  
28278-5005FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

273.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703107**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

206.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3879 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704405**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLAKELEY, ROBERT, , ,**

Mailing Address 5133 HILLCREST DR.

City  
ZACHARYState  
LAZip Code  
70791-3203FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.60

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703686**

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLAUVELT, SHIRLEY, M., MS.,**

Mailing Address 15523 CHENAL RD.

City  
JARREAUState  
LAZip Code  
70749-3513FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703318**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

128.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3880 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703002**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMASState  
ORZip Code  
97015-8629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703568**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYLE, WILLIAM, , ,**

Mailing Address 4807 FAIRFORD DR.

City  
SAN ANTONIOState  
TXZip Code  
78228-1013FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MILITARY MINISTRY OF CRUOccupation (for Individual)  
FIELD MISSIONARY STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

332.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703475**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3881 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROADSTON, LEE, S., MR.,**

Mailing Address 6918 HIGHOVER DR

City  
CHANHASSENState  
MNZip Code  
55317-7567FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HEALTHCARE EXECOccupation (for Individual)  
BCS, INC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703492**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROOTEN, GARY, , ,**

Mailing Address 2107 E COYOTE CT

City  
COLBERTState  
WAZip Code  
99005-9772FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.51

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702766**

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, SHARMAN, , MS.,**

Mailing Address 110 CLIFF ST

City  
CORDOVAState  
ALZip Code  
35550-1216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2819.84

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704191**

Amount of Each Receipt this Period

83.28

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

707.89

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3882 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, SHARMAN, , MS.,**

Mailing Address 110 CLIFF ST

City  
CORDOVAState  
ALZip Code  
35550-1216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2819.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704192**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRUMBAUGH, PHILIP, C., MR.,**

Mailing Address 108 PHILIP DR

City  
WEST MILTONState  
OHZip Code  
45383-1330FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702563**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRUNE, REBECCA, , ,**

Mailing Address 5641 FLACK DR.

City  
HOUSTONState  
TXZip Code  
77081-7405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1276.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703217**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1083.29

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3883 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITY

State  
NJ

Zip Code  
08226-2367

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.96

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703332**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURKE, MARILYN, RISNER, MS.,**

Mailing Address 313 E MAIN ST

City  
DAVIS

State  
OK

Zip Code  
73030-1905

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
INSURANCE AND REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703163**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURLAND, ALICE, , ,**

Mailing Address 4214 WATERBECK ST

City  
FULSHEAR

State  
TX

Zip Code  
77441-3904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.86

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703355**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

97.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3884 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, BEVERLY, , ,**

Mailing Address 13040 LOBLOLLY LN S

City  
JACKSONVILLE

State  
FL

Zip Code  
32246-4171

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27703369**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CANTEY, RICHARD, , MR.,**

Mailing Address 23782 CONTINENTAL DR

City  
CANYON LAKE

State  
CA

Zip Code  
92587-7754

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.11

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27703862**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNES, CALLAND, , ,**

Mailing Address 11078 SAFFOLD WAY

City  
RESTON

State  
VA

Zip Code  
20190-3812

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

629.30

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27704252**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

243.20



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3885 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNES, CALLAND, , ,**

Mailing Address 11078 SAFFOLD WAY

City  
RESTONState  
VAZip Code  
20190-3812FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704260**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARNE, DOUGLAS, A., MR.,**

Mailing Address 169 STRIPERS COVE LN

City  
CLARKSVILLEState  
VAZip Code  
23927-3227FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702693**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNEY, JOSEPH, , MR.,**

Mailing Address 1371 WELLAND DR.

City  
ROCHESTERState  
MIZip Code  
48306-4826FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704294**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3886 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704422

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704427

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704428

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.88

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3887 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVON

State  
OH

Zip Code  
44011-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

JDCA

Occupation (for Individual)

ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704430**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVON

State  
OH

Zip Code  
44011-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

JDCA

Occupation (for Individual)

ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704432**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDEN

State  
AL

Zip Code  
35901-4055

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

COMPASSUS HOSPICE

Occupation (for Individual)

M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27702491**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

88.37

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3888 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDEN

State  
AL

Zip Code  
35901-4055

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
COMPASSUS HOSPICE

Occupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27704407**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CASEY, BRIAN, , ,**

Mailing Address 24182 PASEO DEL CAMPO

City  
LAGUNA NIGUEL

State  
CA

Zip Code  
92677-2409

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27703195**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANA, MAGHAR, S., MR.,**

Mailing Address 315 MERCEDES LANE

City  
COLBURN

State  
IN

Zip Code  
47905-4566

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.51

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27702682**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

106.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3889 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.86

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704386**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHIARAMONTE, MICHAEL, , ,**

Mailing Address 510 CATHEDRAL DRIVE

City  
ALEXANDRIAState  
VAZip Code  
22314-4706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SOUTHERN MARYLAND HOSPITAL CENTEROccupation (for Individual)  
HEALTHCARE EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703246**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHRISTIANS, MARK, , ,**

Mailing Address 23410 HARROW FIELD LN

City  
SPRINGState  
TXZip Code  
77373-2719FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SCHLUMBERGER TECHNOLOGY CORPORATIONOccupation (for Individual)  
CONTRACT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704195**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

404.10

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3890 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CIMINO, SHIRLEY, R., MS.,**

Mailing Address 44600 MONTEREY AVE. APT. A219

City  
PALM DESERT

State  
CA

Zip Code  
92260-3368

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.24

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27704489

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, RAY, , ,**

Mailing Address 9894 BOAT CLUB ROAD

City  
FORT WORTH

State  
TX

Zip Code  
76179-6001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MOTIVATING GRAPHICS

Occupation (for Individual)  
PRINTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.10

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27703675

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLAVEL, ROBERT, L., MR.,**

Mailing Address 827 CARILLON DR.

City  
BARTLETT

State  
IL

Zip Code  
60103-4596

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

718.41

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27703863

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

130.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3891 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COHEN, DAN, , ,**

Mailing Address 2600 NETHERLAND AVE APT 1716

City  
BRONXState  
NYZip Code  
10463-0992FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

564.30

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27702937

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLE, MARYANNE, E., MS.,**

Mailing Address 131 TENBURY RD

City

LUTHERVILLE TIMONI

State

MD

Zip Code

21093-6340

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.08

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27702896

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONRAD, STUART, W., MR.,**

Mailing Address 8522 FREDERICK DR.

City

DE SOTO

State

KS

Zip Code

66018-7110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

341.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27703883

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

313.73

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3892 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOOD

State  
IN

Zip Code  
46142-3722

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27704365**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOOD

State  
IN

Zip Code  
46142-3722

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27704396**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORLE, PATRICIA, , ,**

Mailing Address 2833 ASH RIDGE DR

City  
DAYTON

State  
OH

Zip Code  
45434-5894

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.16

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27703423**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

88.50



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3893 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORMIER, WILLIAM, , MR.,**

Mailing Address 1025 MAIN ST

City  
LEOMINSTERState  
MAZip Code  
01453-1909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703428**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CROSBY, HAZELMAY, M., MS.,**

Mailing Address 1518 W 2500 N

City  
VERNALState  
UTZip Code  
84078-9639FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.71

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703066**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CROWDER, JIMMIE, K., MR.,**

Mailing Address 711 N. BRUNSWICK AVE.

City  
SOUTH HILLState  
VAZip Code  
23970-1515FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROWDER-HITE-CREWSOccupation (for Individual)  
FUNERAL DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.30

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704339**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3894 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAGEL, CAROL, K., ,**

Mailing Address 46356 166TH ST

City  
WATERTOWN

State  
SD

Zip Code  
57201-8767

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OWNER OPERATOR DAGEL FARMS

Occupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.79

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703708**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DALE, PAMELA, , ,**

Mailing Address 18890 TIMBERLAKE DR

City  
CLAREMORE

State  
OK

Zip Code  
74017-1443

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.60

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703848**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAY, MICHAEL, F., ,**

Mailing Address 253 FARR AVE

City  
WADSWORTH

State  
OH

Zip Code  
44281-2146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MDE,LLC

Occupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

328.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703196**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

61.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3895 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704094

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DECKERHOFF, LARRY, , ,**

Mailing Address 33 SUMMER COURT

City  
SPRINGState  
TXZip Code  
77381-6229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TECH MOccupation (for Individual)  
AVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702805

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEMONBRUN, LAYNE, , ,**

Mailing Address 2012 GALLAGHER RD

City  
CENTRALIAState  
WAZip Code  
98531-9310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704459

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3896 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEMPSEY, GORDON, H., MR.,**Mailing Address 8020 FRANKFORD RD  
APT 425City  
DALLASState  
TXZip Code  
75252-6863FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.84

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703241**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DENHOFF, DIANE, K., ,**

Mailing Address 1908 STATE ROUTE 19

City  
WELLSVILLEState  
NYZip Code  
14895-9740FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.26

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702532**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DESSAUER, MARILYNN, , ,**

Mailing Address 8679 BLUE FLAG WAY

City  
NAPLESState  
FLZip Code  
34109-4300FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221.61

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702797**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.08

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3897 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DIAS PINTO, CHERYL, , ,

Mailing Address 4831 S KILPATRICK AVENUE

City  
CHICAGOState  
ILZip Code  
60632-4828FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702930

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DILL, MARY, , ,

Mailing Address 35 SAN MARINO DR.

City  
SAN RAFAELState  
CAZip Code  
94901-1535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703673

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DILL, MARY, , ,

Mailing Address 35 SAN MARINO DR.

City  
SAN RAFAELState  
CAZip Code  
94901-1535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703674

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

46.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3898 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DILL, MARY, , ,**

Mailing Address 35 SAN MARINO DR.

City  
SAN RAFAELState  
CAZip Code  
94901-1535FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703789**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIMARIO, JAMES, , ,**

Mailing Address 7657 WINNETKA AVE

City  
WINNETKAState  
CAZip Code  
91306-2677FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PROPERTY MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704125**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIONNE, DOUGLAS, , ,**

Mailing Address 6122 WINDY KNL

City  
WINDCRESTState  
TXZip Code  
78239-2655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

536.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704512**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3899 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DONOVAN, ANNE, , ,**

Mailing Address 4 WEDGE LANE

City  
SELDENState  
NYZip Code  
11784-3309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703504**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOW, GREG, , ,**

Mailing Address P.O. BOX 1040

City  
RICHLANDState  
WAZip Code  
99352-1040FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703713**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOYLE GODINEZ, DONDI, L., ,**

Mailing Address 2854 STEAMBOAT DR.

City  
BULLHEAD CITYState  
AZZip Code  
86429-1139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702889**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

165.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3900 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DRAZAN, ARTHUR, D., ,**

Mailing Address 330 EAGLE DRIVE

City  
JUPITERState  
FLZip Code  
33477-4066FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704329**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRISKILL, TIM, , ,**

Mailing Address 2940 E. 45TH PLACE

City  
TULSAState  
OKZip Code  
74105-5204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INSURANCEOccupation (for Individual)  
INS AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703825**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUMAS, EDWIN, , ,**

Mailing Address 425 RUSTIC OAKS RD

City  
SEAGOVILLEState  
TXZip Code  
75159-5612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703741**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.09



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3901 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNHAM, VICTORIA, , ,**

Mailing Address PO BOX 517

City  
RIDGEFIELDState  
WAZip Code  
98642-0517FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703525**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNNIVAN, BRYAN, D., MR.,**

Mailing Address 2348 EDESEL DR.

City  
MILPITASState  
CAZip Code  
95035-6110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PACIFIC ASSOCIATESOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703207**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EADEH, LESLIE, , ,**

Mailing Address 664 PUGH RD

City  
WAYNEState  
PAZip Code  
19087-1909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703986**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

234.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3902 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EARL, CONSTANCE, M., MS.,**

Mailing Address 571 GREEN T LK W

City  
HERNANDO

State  
MS

Zip Code  
38632-4511

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.68

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703280**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EARL, CONSTANCE, M., MS.,**

Mailing Address 571 GREEN T LK W

City  
HERNANDO

State  
MS

Zip Code  
38632-4511

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.68

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704186**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINN

State  
TX

Zip Code  
78563-0056

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704384**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

207.69

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3903 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ECKLES, VICKIE, , ,**

Mailing Address 40 LEBANON AVE

City  
GREENVILLE

State  
PA

Zip Code  
16125-1918

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.70

Date of Receipt

02 / 19 / 2025

**Transaction ID : SA11A.27702925**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSON

State  
MD

Zip Code  
21204-4701

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

02 / 19 / 2025

**Transaction ID : SA11A.27703895**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELLESTAD, BOYD, ALLEN, MR.,**

Mailing Address 30508 SANTA LUNA DR.

City  
RANCHO PALOS VERDE

State  
CA

Zip Code  
90275-6318

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

622.12

Date of Receipt

02 / 19 / 2025

**Transaction ID : SA11A.27703500**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

68.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3904 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELLIS, THOMAS, , ,**

Mailing Address 12340 LAKE FOREST DR.

City  
AZLEState  
TXZip Code  
76020-5618FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FWBSIOccupation (for Individual)  
NEUROSURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703954

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702584

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702586

Amount of Each Receipt this Period

3.96

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

121.72

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3905 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUART

State  
FL

Zip Code  
34996-2507

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27702587**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUART

State  
FL

Zip Code  
34996-2507

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27702588**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUART

State  
FL

Zip Code  
34996-2507

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.56

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27702591**

Amount of Each Receipt this Period

18.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

46.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3906 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702593**

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENDORF, BRUCE, , ,**

Mailing Address 312 EAST BROADWAY

City  
LEOTIState  
KSZip Code  
67861-5016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INNKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703485**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704410**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.17

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3907 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704411

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704412

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704414

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3908 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704416**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704417**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EPPS, JAMES, , ,**

Mailing Address 16001 KEVINDALE CT.

City  
JERSEY VILLAGEState  
TXZip Code  
77040-2809FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.65

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704355**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.93



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3909 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FABELO, MARGARITA, , ,**

Mailing Address 19701 EAST LAKE DRIVE

City  
HIALEAHState  
FLZip Code  
33015-2221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.06

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27703653

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FABELO, MARGARITA, , ,**

Mailing Address 19701 EAST LAKE DRIVE

City  
HIALEAHState  
FLZip Code  
33015-2221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.06

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27703658

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FABELO, MARGARITA, , ,**

Mailing Address 19701 EAST LAKE DRIVE

City  
HIALEAHState  
FLZip Code  
33015-2221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.06

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27703660

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

83.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3910 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FABELO, MARGARITA, , ,**

Mailing Address 19701 EAST LAKE DRIVE

City  
HIALEAHState  
FLZip Code  
33015-2221FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.06

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703663**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FAIRBROTHER, BETH, , ,**

Mailing Address P.O. BOX 741

City  
COMANCHEState  
TXZip Code  
76442-0741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.97

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702512**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FAIRBROTHER, BETH, , ,**

Mailing Address P.O. BOX 741

City  
COMANCHEState  
TXZip Code  
76442-0741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

336.97

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702513**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3911 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAIRBROTHER, BETH, , ,**

Mailing Address P.O. BOX 741

City  
COMANCHEState  
TXZip Code  
76442-0741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.97

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702514**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FANNIN, SUZAN, , MS.,**

Mailing Address 5903 85TH ST

City  
LUBBOCKState  
TXZip Code  
79424-3602FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.66

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702502**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FARRALES, RODRIGO, L., MR.,**

Mailing Address 2777 PARADISE RD. UNIT 3504

City  
LAS VEGASState  
NVZip Code  
89109-9125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

605.12

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704402**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

31.24

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3912 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FILIPSKI, DARLA, , ,**

Mailing Address 3903 PRESTON CT

City  
NORMAN

State  
OK

Zip Code  
73072-5019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.21

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703512**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FILIPSKI, DARLA, , ,**

Mailing Address 3903 PRESTON CT

City  
NORMAN

State  
OK

Zip Code  
73072-5019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.21

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704022**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FILIPSKI, DARLA, , ,**

Mailing Address 3903 PRESTON CT

City  
NORMAN

State  
OK

Zip Code  
73072-5019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1008.21

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704027**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

256.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3913 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLEISHER, HARVEY, , ,**

Mailing Address 26 CHAMPIONS

City  
HOUSTONState  
TXZip Code  
77069-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702505**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRANCE, SHERROD, W., MR.,**

Mailing Address PO BOX 607

City  
RAWLINSState  
WYZip Code  
82301-0607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

977.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703953**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703170**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3914 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRANZMEIER, ALVIN, H., DR.,**Mailing Address 1300 S BORDER  
APT 731City  
WESLACOState  
TXZip Code  
78596-7441FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703843**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FREELAND, WAYNE, K., MR.,**

Mailing Address 912 N OXFORD LN

City  
CHANDLERState  
AZZip Code  
85225-5309FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
YUGO MISSIONARYOccupation (for Individual)  
MISSIONARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702643**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FREELAND, WAYNE, K., MR.,**

Mailing Address 912 N OXFORD LN

City  
CHANDLERState  
AZZip Code  
85225-5309FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
YUGO MISSIONARYOccupation (for Individual)  
MISSIONARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702668**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3915 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLOWAY, JIM, , ,**

Mailing Address 6308 PARK AVENUE

City  
ATLANTAState  
GAZip Code  
30342-2362FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.86

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27704397

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27703256

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GERGEN-WISNER, MICHELLE , , ,**

Mailing Address P.O. BOX 368

City  
ESTES PARKState  
COZip Code  
80517-0368FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27703068

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3916 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GEROMEL, ALICIA, , ,**

Mailing Address 4429 LINDEWOOD DR

City  
SWARTZ CREEKState  
MIZip Code  
48473-8224FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.90

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704026**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703237**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLOVER, AVERIL, , ,**

Mailing Address 446 LANCASHIRE RUN

City  
SMITHFIELDState  
NCZip Code  
27577-8029FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.53

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703992**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

183.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3917 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GONZALEZ-BOHORQUEZ, FELIX, E., ,**

Mailing Address 827 BOWIE ROAD

City  
ROCKVILLEState  
MDZip Code  
20852-1042FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702808

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOOCH, DOUG, , ,**

Mailing Address 323 SCHRIMSHER

City  
MADISONState  
ALZip Code  
35758-7836FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703778

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORE, TRINA, , ,**

Mailing Address 14321 SOUTHWEST 20TH STREET

City  
DAVIEState  
FLZip Code  
33325-5426FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1001.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703377

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

153.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3918 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAHAM, JOSEPH, , ,**

Mailing Address 106 LAKEVIEW LANE

City  
HEADLANDState  
ALZip Code  
36345-2202FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.81

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704343**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRATTIDGE, JANICE, , ,**

Mailing Address 3427 SW BRIARWOOD LANE

City  
TOPEKAState  
KSZip Code  
66611-1832FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.01

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702777**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRATTIDGE, JANICE, , ,**

Mailing Address 3427 SW BRIARWOOD LANE

City  
TOPEKAState  
KSZip Code  
66611-1832FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.01

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702786**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3919 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAY, BETHANY, , ,**

Mailing Address 6332 TROON AVENUE SOUTHWEST

City  
PORT ORCHARDState  
WAZip Code  
98367-7600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702756**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAY, BETHANY, , ,**

Mailing Address 6332 TROON AVENUE SOUTHWEST

City  
PORT ORCHARDState  
WAZip Code  
98367-7600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702757**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAY, BETHANY, , ,**

Mailing Address 6332 TROON AVENUE SOUTHWEST

City  
PORT ORCHARDState  
WAZip Code  
98367-7600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702764**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3920 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAY, BETHANY, , ,**

Mailing Address 6332 TROON AVENUE SOUTHWEST

City  
PORT ORCHARDState  
WAZip Code  
98367-7600FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702767

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREENE, BETTY, L., ,**

Mailing Address 711 POSSUM HOLLOW RD

City  
BLOWING ROCKState  
NCZip Code  
28605-9219FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703274

Amount of Each Receipt this Period

34.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIFFIN, RICHARD, C., MR.,**

Mailing Address 3457 CHIPMAN RD

City  
EASTONState  
PAZip Code  
18045-3024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BANGOR AREA SCHOOL DISTOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

508.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704446

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

161.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3921 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROUND, JIM, , ,**

Mailing Address 9791 E DREYFUS AVE

City  
SCOTTSDALEState  
AZZip Code  
85260-4450FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702832

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROUND, JIM, , ,**

Mailing Address 9791 E DREYFUS AVE

City  
SCOTTSDALEState  
AZZip Code  
85260-4450FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703120

Amount of Each Receipt this Period

36.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUERRA, ANTHONY, , ,**

Mailing Address 7136 FENWAY AVE

City  
LAS VEGASState  
NVZip Code  
89147-4736FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TURNING POINT FOR LIFE INCOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703867

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

343.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3922 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUIDA, LISA, , ,**

Mailing Address 1175 PARK AVE

City  
NEW YORKState  
NYZip Code  
10128-1211FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704071**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HALES, J, RANDELL, ,**

Mailing Address 65 HIDDEN FIELDS RD

City  
HIAWASSEEState  
GAZip Code  
30546-2155FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703949**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMILTON, DEAN, , ,**

Mailing Address 1923 W. PINETOP DR.

City  
GREEN VALLEYState  
AZZip Code  
85622-5845FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

243.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703240**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

333.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3923 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMILTON, DEAN, , ,**

Mailing Address 1923 W. PINETOP DR.

City  
GREEN VALLEYState  
AZZip Code  
85622-5845FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704357**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMMONS, JOYCE, , ,**

Mailing Address 3525 NEW DELHI DR.

City  
WINSTON SALEMState  
NCZip Code  
27101-6211FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704418**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAN, NAM, , ,**

Mailing Address 17315 INDIGO MIST COURT

City  
HOUSTONState  
TXZip Code  
77084-1987FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF INDEPENDENT AGENTOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

296.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704303**

Amount of Each Receipt this Period

60.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.47

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3924 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARPER, CINDY, , ,**

Mailing Address 4444 HALIFAX DR

City  
PORT ORANGE

State  
FL

Zip Code  
32127-4535

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.52

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703286**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRISON, ALBERTA, , ,**

Mailing Address 1522 TEAL DR

City  
OCEAN CITY

State  
MD

Zip Code  
21842-5555

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HARRISON GROUP

Occupation (for Individual)  
HOTELS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703282**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRIS, DIANE, , ,**

Mailing Address 5021 WEST 4075 SOUTH

City  
WEST HAVEN

State  
UT

Zip Code  
84401-9386

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.90

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703206**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

306.59



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3925 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARROLD, JOHN, , ,**

Mailing Address 1829 LAUREL OAK DRIVE

City  
MODESTOState  
CAZip Code  
95354-1648FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702531**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARROLD, JOHN, , ,**

Mailing Address 1829 LAUREL OAK DRIVE

City  
MODESTOState  
CAZip Code  
95354-1648FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702533**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703328**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

115.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3926 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703329**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703387**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703391**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2.03

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3927 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACH

State  
FL

Zip Code  
33487-4245

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BOCA RATON FITNESS

Occupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27703393**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACH

State  
FL

Zip Code  
33487-4245

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BOCA RATON FITNESS

Occupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27703396**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACH

State  
FL

Zip Code  
33487-4245

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BOCA RATON FITNESS

Occupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27703397**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

9.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3928 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703402**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARWARD, JAMES, , ,**

Mailing Address 322 NEW KENT PLACE

City  
CARYState  
NCZip Code  
27511-4584FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703528**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAY, KATHY, , ,**

Mailing Address 3 QUAIL VALLEY ROAD

City  
SHERWOODState  
ARZip Code  
72120-9625FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702847**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

31.21

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3929 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAYS, CHARLES, RAYMOND, MR.,**

Mailing Address 3100 BROOKHILL DR.

City  
BIRMINGHAM

State  
AL

Zip Code  
35242-3702

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.71

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704296**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAYS, CHARLES, RAYMOND, MR.,**

Mailing Address 3100 BROOKHILL DR.

City  
BIRMINGHAM

State  
AL

Zip Code  
35242-3702

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.71

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704297**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEINRICHS, SARAH, J., MRS.,**

Mailing Address 6004 AMBER OAKS AVE

City  
BAKERSFIELD

State  
CA

Zip Code  
93306-7008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

324.54

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27702845**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

64.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3930 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENSON, STEVE, , ,**

Mailing Address 224 W. BALD HEAD WYND

City  
SOUTHPORTState  
NCZip Code  
28461-5131FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703130**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERRICK, STEVEN, , ,**

Mailing Address 684 MARGARITA AVENUE

City  
CORONADOState  
CAZip Code  
92118-2321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704003**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERROLD, BARBARA, J., MRS.,**

Mailing Address 3738 MARSBELLA PL

City  
KALAMAZOOState  
MIZip Code  
49006-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
K O PRODUCTSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1029.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702774**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3931 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIGGINBOTHAM, LINDA, L., MRS.,**

Mailing Address 810 HANCOCK AVENUE

City  
NATCHITOCHESState  
LAZip Code  
71457-5518FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NATCHITOCHES PARISH SCHOOLSOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704029**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702807**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOBSON, MARY, , ,**

Mailing Address 340 PEACHTREE CIR

City  
RINGGOLDState  
GAZip Code  
30736-6743FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

383.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703050**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3932 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HODGES, SAM, , ,**

Mailing Address 6202 EAST VOLTAIRE AVENUE

City  
SCOTTSDALEState  
AZZip Code  
85254-3853FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703353**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOISINGTON, JACKIE, , ,**

Mailing Address 2625 W RELATION ST

City  
SAFFORDState  
AZZip Code  
85546-4047FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOOPNER ENERGYOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702878**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLLAR, KENNETH, , ,**

Mailing Address 120 ALLEGHANY DRIVE

City  
SALISBURYState  
NCZip Code  
28147-7229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

373.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703187**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.26



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3933 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLTEN, JAMES, J., MR.,**

Mailing Address 4003 CHESTNUT OAK DR

City  
SMITHTONState  
ILZip Code  
62285-3741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1366.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704123**

Amount of Each Receipt this Period

140.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HORAN, DONALD, , ,**

Mailing Address P.O. BOX 41

City  
JOHNSONState  
NYZip Code  
10933-0041FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702958**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702793**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

210.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3934 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.49

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702683**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.49

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702684**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

734.49

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702690**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3935 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702695

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702697

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

734.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702700

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3936 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702711

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702650

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703613

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

59.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3937 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ISAKOWITZ, ZACHARY, , ,**

Mailing Address 3416 DOE RUN COURT

City  
HERNDONState  
VAZip Code  
20171-3358FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SEMICONDUCTOR INDUSTRY ASSOCIATIONOccupation (for Individual)  
DIRECTOR OF GOVERNMENT AFFAI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703700

Amount of Each Receipt this Period

1200.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACKSON, DEB, , ,**

Mailing Address 3180 PEAR ORCHARD ROAD

City  
GRANBURYState  
TXZip Code  
76048-6817FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702750

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACOBSON, SHARYN, , ,**

Mailing Address 4681 1ST STREET NE #401

City  
SAINT PETERSBURGState  
FLZip Code  
33703-4947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

359.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703135

Amount of Each Receipt this Period

21.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1325.18

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3938 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRING

State  
TX

Zip Code  
77389-7885

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

02 / 19 / 2025

**Transaction ID : SA11A.27704319**

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRING

State  
TX

Zip Code  
77389-7885

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

02 / 19 / 2025

**Transaction ID : SA11A.27704320**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRING

State  
TX

Zip Code  
77389-7885

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.40

Date of Receipt

02 / 19 / 2025

**Transaction ID : SA11A.27704321**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3939 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JENSEN, V., GAIL, ,**

Mailing Address 405 ANGLERSDRIVE, UNIT 1-185

City  
STEAMBOAT SPRINGSState  
COZip Code  
80487-9352FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.50

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703323**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOBLIN, NANCY, , ,**

Mailing Address 19540 SANDRIDGE WAY

City  
LEESBURGState  
VAZip Code  
20176-8286FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703914**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, CRAIG, , ,**Mailing Address 2995 WOODSIDE RD  
SUITE 400-505City  
REDWOOD CITYState  
CAZip Code  
94062-2432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JMPOccupation (for Individual)  
FINANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704153**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.17

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3940 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, JAMES, , ,**

Mailing Address 7785 GRIFFON LN

City  
VERO BEACHState  
FLZip Code  
32966-2559FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703128**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, JAY, , ,**

Mailing Address 3301 S OLAF HILL DR.

City  
HACIENDA HEIGHTSState  
CAZip Code  
91745-6142FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.84

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703634**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAMINSKI, BARBARA, , ,**

Mailing Address 214 WATERFORD DR.

City  
EDISONState  
NJZip Code  
08817-1914FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

403.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704513**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

310.68



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3941 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KANDT, ALICIA, , ,

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703757

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KANDT, ALICIA, , ,

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703899

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KANDT, ALICIA, , ,

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704005

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

184.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3942 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702649

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KENT, RUTH, , ,**

Mailing Address 2151 OAKLAND RD

City  
SAN JOSEState  
CAZip Code  
95131-1564FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704464

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KIRBY, ERROL, , MR.,**

Mailing Address 2895 TOBIANO DR.

City  
RENOState  
NVZip Code  
89521-8022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

797.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702506

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

131.09

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3943 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KIRBY, ERROL, , MR.,

Mailing Address 2895 TOBIANO DR.

City  
RENOState  
NVZip Code  
89521-8022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

797.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702545

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KIRKHAM, ROGER, , ,

Mailing Address 3860 BOULDER PATCH

City  
RENOState  
NVZip Code  
89511-3261FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702804

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KLOCK, JOSEPH, , , JR.

Mailing Address 2555 PONCE DE LEON BLVD

City  
CORAL GABLESState  
FLZip Code  
33134-6010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RASCO KLOCK PEREZ NIETOOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

676.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703034

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

399.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3944 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNOWLES, RICHARD, N., DR.,**Mailing Address 6083 BAHIA DEL MAR CIRCLE  
UNIT 564City  
SAINT PETERSBURGState  
FLZip Code  
33715-2377FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703062**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOONTZ, LINDA, , ,**

Mailing Address 155 PARKLAND DR

City  
SALISBURYState  
NCZip Code  
28146-8205FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703943**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOSTREWSKI, BLAGOI, , ,**

Mailing Address 333 WYNNE RIDGE CT

City  
GAHANNAState  
OHZip Code  
43230-4550FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

213.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704478**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

127.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3945 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOTHAPALLI, SRINIVASA, , ,**

Mailing Address 2501 JIMMY JOHNSON

City  
PORT ARTHURState  
TXZip Code  
77640-2000FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703582

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRENZ, KAREN, , ,**

Mailing Address 1516 4TH AVE E

City  
WILLISTONState  
NDZip Code  
58801-4323FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHERS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703659

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUMERLE, KENNETH, , MR.,**

Mailing Address 3317 CONSERVANCY LANE

City  
CHARLESTONState  
SCZip Code  
29414-8114FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702975

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

239.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3946 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.91

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703435**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.91

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703927**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KURTI, S., CAROL, ,**

Mailing Address 934 COWEE SCHOOL RD.

City  
FRANKLINState  
NCZip Code  
28734-4524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

408.68

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703931**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.62

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3947 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANDESMAN, MARIA, A., MRS.,**

Mailing Address 920 PARK AVE. APT. 10A

City  
NEW YORK

State  
NY

Zip Code  
10028-0369

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.48

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703622**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANE, DAVINA, , ,**

Mailing Address 11323 PACIFIC ST.

City  
COLUMBIA

State  
CA

Zip Code  
95310-9603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.50

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704264**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANE, DAVINA, , ,**

Mailing Address 11323 PACIFIC ST.

City  
COLUMBIA

State  
CA

Zip Code  
95310-9603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

454.50

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704461**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

136.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3948 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANG, WILLIAM, , ,**

Mailing Address 280 HILLENDALE RD.

City  
DOYLESTOWNState  
PAZip Code  
18901-4911FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LENOX INST.CO.Occupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703912**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAPINSKI, MATHEW, , MR.,**Mailing Address 4424 45TH ST, NW  
APT 304City  
WASHINGTONState  
DCZip Code  
20016-2053FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CROSSROADS STRATEGIESOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703809**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEAVENS, CAMERON, , ,**

Mailing Address 979 SYIDA DR.

City  
PACIFIC GROVEState  
CAZip Code  
93950-5327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CAMERON LEAVENSOccupation (for Individual)  
LAND CARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

566.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702519**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

385.33



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3949 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITY

State  
CA

Zip Code  
94404-3949

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27702939**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEWISSMITH, ROSALIND, , MRS.,**

Mailing Address 503 CYPRESS LINKS WAY

City  
TAYLORS

State  
SC

Zip Code  
29687-6473

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.12

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703021**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LICATA, STEPHEN, , ,**

Mailing Address 213-19 99TH AVENUE

City  
QUEENS VILLAGE

State  
NY

Zip Code  
11429-1134

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JLJ ENTERPRISES

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

358.20

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704331**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

134.55

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3950 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITY

State  
IN

Zip Code  
47557-7130

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703728**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LINDENBERG, LARRY, , MR.,**

Mailing Address 846 DOERFLER DR.

City  
KIMBERLY

State  
WI

Zip Code  
54136-2304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.07

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703590**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINDENBERG, LARRY, , MR.,**

Mailing Address 846 DOERFLER DR.

City  
KIMBERLY

State  
WI

Zip Code  
54136-2304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

592.07

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704145**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

107.88

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3951 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOUGHNEY, ROBERT, D., MR.,**

Mailing Address 2316 GOLDSMITH ST

City  
HOUSTON

State  
TX

Zip Code  
77030-1130

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOUGHNEY CONSULTING INC.

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.36

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704460**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORT

State  
FL

Zip Code  
33897-6419

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703884**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LYONS, GEORGE, , ,**

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLE

State  
GA

Zip Code  
30534-5242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1658.27

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703747**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

94.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3952 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MADDEN, STEVE, , ,**

Mailing Address 16890 NORTH RIVER SHORES ROAD

City  
NORTHPORTState  
ALZip Code  
35475-2519FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.30

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703756**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MADSEN, ANDREW, H., ,**

Mailing Address 2901 SPRINGFIELD ROAD

City  
BROOMALLState  
PAZip Code  
19008-1308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MADSEN INCOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.02

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703343**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAGRUDER, SHERYL, , ,**

Mailing Address 576 CONCORD LANE

City  
KALISPELLState  
MTZip Code  
59901-5111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1103.39

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703013**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3953 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARKS, JULIE, , ,**

Mailing Address 5220 BLOSSOMWOOD CT

City  
FAIR OAKSState  
CAZip Code  
95628-3836FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704504

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARKS, JULIE, , ,**

Mailing Address 5220 BLOSSOMWOOD CT

City  
FAIR OAKSState  
CAZip Code  
95628-3836FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704511

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

464.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703594

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

94.30

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3954 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLE

State  
MI

Zip Code  
48066-1319

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.39

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703092**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATEER, RAYMOND, , ,**

Mailing Address 1278 MATEER RD

City  
KITANNING

State  
PA

Zip Code  
16201-8024

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.08

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27702880**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MC DONALD, MELODY, L., MRS.,**

Mailing Address 1098 VERNIER PLACE

City  
STANFORD

State  
CA

Zip Code  
94305-1027

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

532.14

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703316**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

85.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3955 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCARTHY, MICHAEL, , ,**

Mailing Address 1225 VIENNA DR. SPC 365

City  
SUNNYVALEState  
CAZip Code  
94089-1843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GREEN GALAXY HOMES, INC.Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703942**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCREA, JAMES, , MR.,**Mailing Address 50 RELIANCE RD  
LOT 40City  
ROCK SPRINGSState  
WYZip Code  
82901-9718FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704435**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCFADDEN, ROYCE, , MR.,**

Mailing Address 1250 FM 168

City  
OLTONState  
TXZip Code  
79064-2118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

267.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702959**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3956 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCFADDEN, ROYCE, , MR.,**

Mailing Address 1250 FM 168

City  
OLTONState  
TXZip Code  
79064-2118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702962**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCGAVOCK, VICKI, , ,**

Mailing Address 4004 109TH ST

City  
LUBBOCKState  
TXZip Code  
79423-0880FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702675**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCGAVOCK, VICKI, , ,**

Mailing Address 4004 109TH ST

City  
LUBBOCKState  
TXZip Code  
79423-0880FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

618.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703064**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.57



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3957 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCGINNIS, SCOTT, , ,**

Mailing Address 45A POPPY LOOP LANE

City  
JASPERState  
ALZip Code  
35504-0007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703600**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNEIL, COLLIN, , ,**

Mailing Address 1701 HORSESHOE TRAIL

City  
CHESTER SPRINGSState  
PAZip Code  
19425-1814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703668**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCVADON, DIANNA, , ,**

Mailing Address 1800 ADAMS ACRES RD.

City  
SAINT AUGUSTINEState  
FLZip Code  
32084-9300FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702859**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3958 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCVADON, DIANNA, , ,**

Mailing Address 1800 ADAMS ACRES RD.

City  
SAINT AUGUSTINE

State  
FL

Zip Code  
32084-9300

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.12

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703252**

Amount of Each Receipt this Period

44.18

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCVADON, DIANNA, , ,**

Mailing Address 1800 ADAMS ACRES RD.

City  
SAINT AUGUSTINE

State  
FL

Zip Code  
32084-9300

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.12

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703416**

Amount of Each Receipt this Period

120.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. METHA, RONALD, , ,**

Mailing Address PO BOX1286

City  
LITCHFIELD PARK

State  
AZ

Zip Code  
85340-1286

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.64

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703069**

Amount of Each Receipt this Period

45.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

209.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3959 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. METZGER, AGNES, , ,**Mailing Address 888 PARK AVENUE  
2CCity  
NEW YORKState  
NYZip Code  
10075-0282FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1259.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703334

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEYERS-GLYDA, DONNA, , MS.,**

Mailing Address 7512 VALHALLA DRIVE

City  
MAUMEEState  
OHZip Code  
43537-9512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SERENITY REALTYOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703723

Amount of Each Receipt this Period

1.07

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEYERS-GLYDA, DONNA, , MS.,**

Mailing Address 7512 VALHALLA DRIVE

City  
MAUMEEState  
OHZip Code  
43537-9512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SERENITY REALTYOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704287

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.28

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3960 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, JACK, W., DR.,**

Mailing Address 100 PROFESSIONAL PL STE. 104

City  
CARROLLTON

State  
GA

Zip Code  
30117-3827

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
DEVELOP-BEHAVIORAL PEDIATRICI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703877**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, JAMES, E., ,**

Mailing Address 2235 DEXTER RD.

City  
AUBURN HILLS

State  
MI

Zip Code  
48326-2307

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.37

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704095**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGE

State  
NC

Zip Code  
27310-9109

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27702768**

Amount of Each Receipt this Period

3.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

108.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3961 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702728**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MINOR, LEE, , ,**

Mailing Address 1590 LUCAS RD

City  
MANSFIELDState  
OHZip Code  
44903-9670FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704203**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703502**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3962 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOODY, JO, ANN, ,**

Mailing Address 507 POWER DR.

City  
DUNCANVILLEState  
TXZip Code  
75116-3721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703144

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORRIS, ANJALI, , ,**

Mailing Address 863-C SAN PABLO AVENUE

City  
ALBANYState  
CAZip Code  
94706-1683FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703969

Amount of Each Receipt this Period

21.78

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRIS, MIKE, , ,**

Mailing Address 578 SNAPDRAGON WAY

City  
IMPERIALState  
CAZip Code  
92251-8947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

842.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704163

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.38

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3963 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOSER, ROBIN, , ,**

Mailing Address 348 BURR COURT

City  
FORT MILLState  
SCZip Code  
29715-0162FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.88

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703790**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOSSMAN, GUY, , ,**

Mailing Address 603 SEAWARD DRIVE

City  
CHARLESTONState  
SCZip Code  
29412-8941FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ORBIS INCOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.20

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704119**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUELLER, JUDY, , ,**

Mailing Address 20906 W SNOWBERRY LN

City  
PLAINFIELDState  
ILZip Code  
60544-7495FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.95

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703764**

Amount of Each Receipt this Period

19.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

143.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3964 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURPHY, GERALD, , MR.,**

Mailing Address 6025 COUNTY ROAD 2

City  
BEARDSLEYState  
MNZip Code  
56211-4025FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AG FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703814**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURPHY, STANWOOD, , , JR.**

Mailing Address POB 249

City  
FORTUNAState  
CAZip Code  
95540-0249FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703564**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURPHY, STANWOOD, , , JR.**

Mailing Address POB 249

City  
FORTUNAState  
CAZip Code  
95540-0249FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

451.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703640**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

218.62



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3965 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, DAVE, , MR.,**

Mailing Address 1206 W TYSON ST

City  
CHANDLERState  
AZZip Code  
85224-4323FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TIMES MICROWAVE SYSTEMSOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.10

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703414**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NAHINU, BETH, , ,**

Mailing Address 1186 EAST 900 SOUTH

City  
ST GEORGEState  
UTZip Code  
84790-5437FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702826**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NAMORATO, MICHAEL, , ,**

Mailing Address 129 LAKEWAY DR.

City  
OXFORDState  
MSZip Code  
38655-9600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.35

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702528**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3966 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NARANG, PAUL, JOHN, MR.,**Mailing Address 8450 82ND STREET  
APT 110City  
PLEASANT PRAIRIEState  
WIZip Code  
53158-2536FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DELOITTEOccupation (for Individual)  
INFORMATION TECHNOLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703664**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, MIKE, G., ,**

Mailing Address 711 E 3230 N

City  
LEHIState  
UTZip Code  
84043-2910FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.42

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702965**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, PAUL, , ,**

Mailing Address 6803 NORTH 68TH PLAZA

City  
OMAHAState  
NEZip Code  
68152-2177FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.18

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704465**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

99.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3967 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704279**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704290**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

856.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704305**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

201.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3968 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEMEROFF, EILEEN, , ,**

Mailing Address 20 POND CROSSING

City  
SOUTHAMPTONState  
NYZip Code  
11968-4728FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1332.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704002**

Amount of Each Receipt this Period

37.48

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEVES, RICHARD, , ,**

Mailing Address 737 DANE CT

City  
HEMETState  
CAZip Code  
92543-1785FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702992**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NGUYEN, NGAI, X., DR.,**Mailing Address 696 EAST SANTA CLARA STREET  
108City  
SAN JOSEState  
CAZip Code  
95112-1911FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1564.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702814**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.79

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3969 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NGUYEN, TOAN, , ,**

Mailing Address 472 ILCREST DR.

City  
HOUSTONState  
TXZip Code  
77042-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702731**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIEMANN, JULI, , ,**

Mailing Address 3101 CHRISTINE STREET NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-4823FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USFWSOccupation (for Individual)  
LANDSCAPE ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702496**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NYGREN, BONNIE, C., MS.,**

Mailing Address 360 S GRAND ST.

City  
ORANGEState  
CAZip Code  
92866-2014FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702745**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

184.10

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3970 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLSEN, RORY, , ,**

Mailing Address 11007 CRANBROOK ROAD

City  
HOUSTON

State  
TX

Zip Code  
77042-1327

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.30

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27702819**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ORYALL, CORA, , MS.,**

Mailing Address 7414 PALM CT

City  
PLEASANTON

State  
CA

Zip Code  
94588-4851

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.67

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703224**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703363**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

97.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3971 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OTTO, WAYNE, , MR.,**

Mailing Address 1232 LITTLE BEAR LOOP

City  
LEWIS CENTERState  
OHZip Code  
43035-1100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704278

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAINTER, GLORIA, , ,**

Mailing Address 2516 BARBADOS DRIVE

City  
GAUTIERState  
MSZip Code  
39553-6762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702765

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAINTER, GLORIA, , ,**

Mailing Address 2516 BARBADOS DRIVE

City  
GAUTIERState  
MSZip Code  
39553-6762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702771

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3972 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALMER, JEAN, B., MRS.,**

Mailing Address 224 ARNOLD AVE

City  
SYRACUSEState  
NYZip Code  
13210-3714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702694**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARKS, JENNIE, , ,**

Mailing Address 386 W TROXELL RD

City  
OAK HARBORState  
WAZip Code  
98277-7909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702799**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERRY, NELL, , ,**

Mailing Address 1705 PALMETTO CV

City  
DERIDDERState  
LAZip Code  
70634-5382FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

597.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703309**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.53



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3973 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLK

State  
VA

Zip Code  
23507-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704421**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTION

State  
MO

Zip Code  
64834-9746

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY CO

Occupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703058**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMS

State  
MN

Zip Code  
56686-4509

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27702565**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3974 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703271

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIETTE, LYSSA, , ,**

Mailing Address 118 EAST ERIE STREET 23A

City  
CHICAGOState  
ILZip Code  
60611-5151FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703312

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POCHE, ROY, , ,**

Mailing Address 1004 BERNIS RD

City  
SAINT MARTINVILLEState  
LAZip Code  
70582-7009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2082.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702782

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1107.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3975 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703301**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PORTER, CHARLES, , ,**

Mailing Address 3167 HICKORY DR.

City  
ELLSTONState  
IAZip Code  
50074-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.97

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704505**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PORTER, CHARLES, , ,**

Mailing Address 3167 HICKORY DR.

City  
ELLSTONState  
IAZip Code  
50074-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.97

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704509**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3976 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRATT, BRENDA, , ,**

Mailing Address 2312 HICKORY RIDGE DRIVE

City  
BOSSIER CITYState  
LAZip Code  
71111-5513FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.70

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703296**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRATT, RANDY, , ,**

Mailing Address 725 OKEMOS ROAD

City  
MASONState  
MIZip Code  
48854-9333FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704350**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRESLEY, JUANITA, , MS.,**

Mailing Address 4115 E. CLOCKTOWER LANE, APT. 246

City  
MERIDIANState  
IDZip Code  
83642-4742FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

960.53

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703580**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3977 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PUGSLEY, CHARLES, , ,**

Mailing Address 9101 BRIDGEVIEW CT

City  
FREDERICKSBURGState  
VAZip Code  
22407-9281FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703605**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUALEY, VALORIE, , ,**

Mailing Address 2958 SOUTHPARK

City  
PRESCOTTState  
AZZip Code  
86305-6417FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702631**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAYCRAFT, ALVIN, K., ,**

Mailing Address 7983 BUSSA LANE

City  
RAPID CITYState  
MIZip Code  
49676-9203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

322.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704394**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

282.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3978 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REEDER, KENT, , ,**

Mailing Address 3899 ORCHARD LN

City  
BEULAHState  
MIZip Code  
49617-9675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REEDERREN-OOccupation (for Individual)  
SELF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702738**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REINHARD, ROSEMARIE, , MR.,**

Mailing Address 2755 FALCON STREET

City  
EAST MEADOWState  
NYZip Code  
11554-4318FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702689**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REISS, CLAIRE, K., MRS.,**Mailing Address 464 PROSPECT STREET  
UNIT 501City  
LA JOLLAState  
CAZip Code  
92037-4742FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1431.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703298**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3979 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702788

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RITCHIE, PATTI, , ,**Mailing Address 3000 MOUNT HOPE RD  
LOT 6City  
GRASS LAKEState  
MIZip Code  
49240-8905FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703447

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBERTSON, ROBERT, , ,**

Mailing Address 97 WEST MAIN STREET APPT. 78

City  
NIANTICState  
CTZip Code  
06357-1732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702489

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3980 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, EUGENE, , ,**

Mailing Address 4766 E 18TH STREET

City  
TUCSON

State  
AZ

Zip Code  
85711-4359

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704342**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROLKER, JOHN, G., MR.,**

Mailing Address 14 W SARATOGA ST

City  
BALTIMORE

State  
MD

Zip Code  
21201-4207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.50

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703762**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROONEY, RANDALL, , ,**

Mailing Address 101 ONEILL CT

City  
FOLSOM

State  
CA

Zip Code  
95630-2379

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.48

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704162**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3981 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703194**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVERState  
NJZip Code  
08882-1908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703991**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANGMALEE, VARINEE, , MRS.,**

Mailing Address 4351 LAKE CHIMNEY CT. NE

City  
ROSWELLState  
GAZip Code  
30075-3138FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702679**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.99

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3982 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIP

State  
NJ

Zip Code  
08831-5978

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703269**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHNEEGASS, GEORGE, F., MR.,**

Mailing Address 3675 MOUNTAIN DR.

City  
COLORADO SPRINGS

State  
CO

Zip Code  
80918-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

634.42

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703571**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHNEIDER, JUDY, , ,**

Mailing Address 55 WEST FIFTH AVE. 15C

City  
SAN MATEO

State  
CA

Zip Code  
94402-2056

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

389.67

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703295**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

141.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3983 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHUCKER, JEFFREY, D., MR.,**

Mailing Address 451 MOUNTAIN RD

City  
KEMPTON

State  
PA

Zip Code  
19529-9336

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BAILEY WOOD PRODUCTS

Occupation (for Individual)  
GEN. MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27703866**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, JOAN, C., MS.,**

Mailing Address 5094 TEN MILE PL.

City  
CASTLE ROCK

State  
CO

Zip Code  
80108-8837

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.53

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27703361**

Amount of Each Receipt this Period

24.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEGUIN, JULIE, , ,**

Mailing Address 930 DULCE VIS

City  
SAN ANTONIO

State  
TX

Zip Code  
78260-4404

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
DEVELOPMENT DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.44

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27702537**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

174.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3984 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEIGNEUR, PAUL, , ,**

Mailing Address 11923 RANCHITO ST

City  
EL MONTEState  
CAZip Code  
91732-1619FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704437

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEITER, JOHN, H., MR.,**

Mailing Address 3293 PADARO LN

City  
CARPINTERIAState  
CAZip Code  
93013-1116FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1166.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704075

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEITER, JOHN, H., MR.,**

Mailing Address 3293 PADARO LN

City  
CARPINTERIAState  
CAZip Code  
93013-1116FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1166.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704076

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

166.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3985 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEPHTON, GAYLE, , ,**

Mailing Address 150E LAKESHORE DR. #72

City  
LAKE ELSINOREState  
CAZip Code  
92530-4241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703803**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEYLLER, FABIAN, , ,**

Mailing Address 185 BUCKLEY DRIVE

City  
ROCKFORDState  
ILZip Code  
61107-5806FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SFGOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703709**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHAW, DAVID, L., DR.,**

Mailing Address 225 COLEWOOD WAY

City  
ATLANTAState  
GAZip Code  
30328-2922FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

356.25

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704105**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3986 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHAYS, LORRAINE, , ,**

Mailing Address 14659 CANALVIEW DRIVE APT A

City  
DELRAY BEACHState  
FLZip Code  
33484-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.21

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702594**

Amount of Each Receipt this Period

7.29

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHELDON, JAMES, , MR.,**

Mailing Address P.O. BOX 179

City  
SCOTTSVILLEState  
KYZip Code  
42164-0179FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
GOSPEL MUSIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703108**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHERROD, CLIFFORD, , ,**

Mailing Address 28900 SOUTH SONCY ROAD

City  
CANYONState  
TXZip Code  
79015-6420FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

599.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703440**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1017.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3987 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702516

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702518

Amount of Each Receipt this Period

23.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703677

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

90.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3988 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703679**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703681**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703683**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.96



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3989 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTIN

State  
TX

Zip Code  
78739-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703685**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTIN

State  
TX

Zip Code  
78739-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703691**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTIN

State  
TX

Zip Code  
78739-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703696**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

112.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3990 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHMOLDAS, CHESTER, J., MR.,**

Mailing Address 1700 N REID HOOKER

City  
EADSState  
TNZip Code  
38028-7960FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TOBACCO SUPERSTORES, INC.Occupation (for Individual)  
BUSINESS MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703160**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SILVEIRA, CHRIS, , ,**

Mailing Address 3 HILLBILLY LN, LOT A

City

CRESCENT VALLEY

State

NV

Zip Code

89821-8083

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703413**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLOCUMB, JOANELLEN, H., MRS.,**

Mailing Address PO 3892

City

INCLINE VILLAGE

State

NV

Zip Code

89450-

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

279.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703543**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3991 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, CHRIS, , ,**

Mailing Address 2082 WILLOW BEACH

City  
KEEGO HARBORState  
MIZip Code  
48320-1210FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704262**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, LINDA, NESTOR, ,**Mailing Address 700 PENN CENTER BLVD APT 403  
LAUREL VILLAGE APTSCity  
PITTSBURGHState  
PAZip Code  
15235-5916FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702585**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702968**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3992 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNOWDEN, JAMES, , MR., III**

Mailing Address 4033 TAMWORTH RD

City  
FORT WORTHState  
TXZip Code  
76116-7337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1694.01

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703625**

Amount of Each Receipt this Period

94.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702910**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704196**

Amount of Each Receipt this Period

23.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3993 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOSNICK, NIKKE, R., MS.,**

Mailing Address 510 PAJARO CT

City  
SACRAMENTO

State  
CA

Zip Code  
95864-7229

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
DESIGNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27702483**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPAETH, EDMUND, , ,**

Mailing Address 26536 LOVE LN

City  
RAMONA

State  
CA

Zip Code  
92065-4822

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.16

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704399**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPALLONE, ARLENE, , ,**

Mailing Address 5925 BRAE BURN CIR

City  
VERO BEACH

State  
FL

Zip Code  
32967-5277

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.16

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703039**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

146.85

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3994 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPEIGHT, CAROL, E., ,

Mailing Address 1421 HWY 641 SOUTH

City  
PARISState  
TNZip Code  
38242-6750FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703354

Amount of Each Receipt this Period

4.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEAD, LINDA, , ,

Mailing Address 1460 OLD NELSON RD

City

BALL GROUND

State

GA

Zip Code

30107-2716

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704200

Amount of Each Receipt this Period

1.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEAD, LINDA, , ,

Mailing Address 1460 OLD NELSON RD

City

BALL GROUND

State

GA

Zip Code

30107-2716

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704205

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3995 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEIGER, JEANNE, , MS.,**

Mailing Address 877NEVADA. WYNFORD

City  
BUCYRUSState  
OHZip Code  
44820-9440FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702868**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEINMETZ, LEE, , ,**

Mailing Address POB 694

City  
TOPPENISHState  
WAZip Code  
98948-0694FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703742**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702773**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

352.08

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3996 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISON

State  
TN

Zip Code  
37115-5927

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27702776**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISON

State  
TN

Zip Code  
37115-5927

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703022**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISON

State  
TN

Zip Code  
37115-5927

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703024**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

4.12



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3997 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEVENS, KENNETH, M., MR.,

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2025

Transaction ID : SA11A.27703027

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEVENS, KENNETH, M., MR.,

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2025

Transaction ID : SA11A.27703033

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEVENS, KENNETH, M., MR.,

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2025

Transaction ID : SA11A.27703035

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3998 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703038**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703046**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704475**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3999 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27704476

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27704477

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

Transaction ID : SA11A.27704480

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4000 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704481

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704482

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704483

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

39.06

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4001 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704485

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703036

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703037

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4002 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUDOL, JEAN, , ,**

Mailing Address 2640 GATELY DRIVE WEST

City  
WEST PALM BEACHState  
FLZip Code  
33415-7996FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.79

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704155**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SULLIVAN, DAVE, , ,**

Mailing Address 333 GLORIETTA BLVD.

City  
ORINDAState  
CAZip Code  
94563-3242FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703299**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUTLIFF, GREG, L., ,**

Mailing Address 700 CREEK

City  
CAMP HILLState  
PAZip Code  
17011-1619FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703656**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4003 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUYENAGA, LORIE, , ,**

Mailing Address 7396 W83RD ST

City  
LOS ANGELESState  
CAZip Code  
90045-2447FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703345

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SYLVESTRI, RONALD, J., MR.,**

Mailing Address 333 WEST STREET # 5

City  
DARIENState  
CTZip Code  
06820-4038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704001

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, BOBBY, L., MR.,**

Mailing Address 1921 MONTERREY ST

City  
ALLENState  
TXZip Code  
75013-6133FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RYDEROccupation (for Individual)  
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703114

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

285.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4004 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TEMPLETON, GREG, , ,**

Mailing Address 13309 DESERT FLOWER PLACE NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-5509FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SGWSOccupation (for Individual)  
EVP GM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.20

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703180**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMAS, AFTON, , MS.,**

Mailing Address 2178 E BENDAMERE CIR

City  
SALT LAKE CITYState  
UTZip Code  
84109-1907FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.92

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703333**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMAS, AFTON, , MS.,**

Mailing Address 2178 E BENDAMERE CIR

City  
SALT LAKE CITYState  
UTZip Code  
84109-1907FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

301.92

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703560**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.98



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4005 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMAS, JEANNE, , ,**

Mailing Address 5 HIBISCUS LANE

City  
AYERState  
MAZip Code  
01432-1550FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MESSAGE THERAPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703051

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMAS, LORITA, , ,**

Mailing Address 2000 WEST INTERNATIONAL AIRPORT RO

City

ANCHORAGE

State

AK

Zip Code

99502-1117

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ATP MEDICINE, LTDOccupation (for Individual)  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702737

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, LUCILLE, , MS.,**

Mailing Address 660 WHITMORE RD APT 102

City

DETROIT

State

MI

Zip Code

48203-1841

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

298.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704110

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

218.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4006 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TJADEN, PAUL, W., MR.,**

Mailing Address 9935, W GOOD HOPE RD

City  
MILWAUKEEState  
WIZip Code  
53224-3813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702794

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRACHTMAN, KAREN, , ,**

Mailing Address 26 SCHERMERHORN ST

City  
BROOKLYNState  
NYZip Code  
11201-4803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703574

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRUMP, THOMAS, , ,**

Mailing Address 1004 EMIL CT

City  
BLACKSBURGState  
VAZip Code  
24060-5073FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704286

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4007 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704154**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702551**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.29

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702785**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

41.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4008 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VASEK, GARY, R., MR.,**

Mailing Address 6387 ASHCROFT DR.

City  
COLORADO SPRINGSState  
COZip Code  
80918-3241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.85

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704458**

Amount of Each Receipt this Period

7.29

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAWTER, STEVE, , ,**

Mailing Address 1701 CATALINA AVE

City  
SEAL BEACHState  
CAZip Code  
90740-5710FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704056**

Amount of Each Receipt this Period

59.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VENNUM, PAULINE, , ,**

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDOState  
FLZip Code  
32801-4360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

675.43

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702749**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.69

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4009 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VENNUM, PAULINE, , ,**

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDO

State  
FL

Zip Code  
32801-4360

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.43

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704171**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VENNUM, PAULINE, , ,**

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDO

State  
FL

Zip Code  
32801-4360

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.43

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704173**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VENNUM, PAULINE, , ,**

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDO

State  
FL

Zip Code  
32801-4360

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

675.43

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704179**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

16.50

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4010 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VERDUN, MARGARET, , ,

Mailing Address 16095 LAMBRUSCO WAY

City  
FISHERSState  
INZip Code  
46037-7372FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704198

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VO, HONG, , ,

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704208

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VO, HONG, , ,

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704493

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

52.94

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4011 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSE

State  
CA

Zip Code  
95116-3254

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLC

Occupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27704501**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALDMAN, DEANE, , ,**

Mailing Address 16505 FOWLER MILL COVE

City  
AUSTIN

State  
TX

Zip Code  
78717-5531

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703225**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALDRUP, JAMES, , , III**

Mailing Address 2423 WINTHROP RD

City  
TALLAHASSEE

State  
FL

Zip Code  
32308-0524

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STREAM ENERGY, INC.

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1215.13

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025

**Transaction ID : SA11A.27703589**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

116.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4012 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALDRUP, JAMES, , , III**

Mailing Address 2423 WINTHROP RD

City  
TALLAHASSEE

State  
FL

Zip Code  
32308-0524

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
STREAM ENERGY, INC.

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1215.13

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27703593**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALDRUP, JAMES, , , III**

Mailing Address 2423 WINTHROP RD

City  
TALLAHASSEE

State  
FL

Zip Code  
32308-0524

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
STREAM ENERGY, INC.

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1215.13

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27703595**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WARNOCK, DIANA, , ,**

Mailing Address 1089 FM 2276

City  
KILGORE

State  
TX

Zip Code  
75662-6981

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11A.27702995**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

189.47



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4013 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702561**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703751**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATSON, KATHLEEN, , ,**

Mailing Address 333 SE 119TH STREET

City  
SOUTH BEACHState  
ORZip Code  
97366-9629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27703235**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4014 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEBB, ROSS, A., MR.,**

Mailing Address 6312 N LE MAI AVE.

City  
CHICAGOState  
ILZip Code  
60646-4828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.20

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703429**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEHMAN, JOAN, , ,**

Mailing Address 831 HICKORY KNOB CIRCLE

City  
CEDAR HILLState  
TXZip Code  
75104-7803FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1670.81

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702554**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEISS, NATHAN, , ,**

Mailing Address 19443 WATERS CURVE WAY

City  
BOCA RATONState  
FLZip Code  
33434-5118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704112**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

191.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4015 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELLS, JOE, , ,**

Mailing Address 207 JULIUS AVENUE

City  
PIKEVILLEState  
KYZip Code  
41501-1739FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MASON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.76

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702763**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WENDEL, KELLY, , ,**

Mailing Address 461 SHORTYS LN

City  
FREDERICKSBURGState  
TXZip Code  
78624-5913FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703933**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WENTWORTH, LLOYD, , ,**

Mailing Address 232 JACOB LN

City  
PRESCOTTState  
AZZip Code  
86303-8806FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703637**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

240.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4016 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703098**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WICKLINE, RICHARD, , ,**Mailing Address 1125 MCGEE CT NE  
UNIT 372City  
SALEMState  
ORZip Code  
97303-9469FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.22

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703221**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIGGERS, LOWE, H., , III**

Mailing Address 466 HUMPHREY LANE

City  
MARYSVILLEState  
OHZip Code  
43040-2634FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

382.94

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704336**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4017 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILHELM, JOSEPH, L., MR.,**

Mailing Address 884 PEBBLEBROOK LANE

City  
EAST LANSINGState  
MIZip Code  
48823-2164FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27704375**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, BLAKE, , , JR.**

Mailing Address 155 SUMMERFIELD DR.

City  
JACKSONState  
TNZip Code  
38305-9794FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.74

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27703077**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, STEVE, , ,**

Mailing Address 1305 233RD ST SE

City  
BOTHELLState  
WAZip Code  
98021-5804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

428.64

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2025**Transaction ID : SA11A.27702755**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4018 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOOD, RONALD, , MR.,**Mailing Address 21016 SE STARK ST  
UNIT 19City  
GRESHAMState  
ORZip Code  
97030-2043FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703112

Amount of Each Receipt this Period

46.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODRUFF, RICHARD, , ,**Mailing Address 5430 NEW NORTHSIDE DR.  
SUITE 200City  
ATLANTAState  
GAZip Code  
30339-7424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HONDA CARLANDOccupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704372

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27702942

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

133.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4019 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YANCEY, JO ANN, , ,

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27703290

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YOUNGBLUT, JOANNE, M., DR.,

Mailing Address 1655 KNUDSON RUN

City  
THE VILLAGESState  
FLZip Code  
32163-5415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704506

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YOUNGBLUT, JOANNE, M., DR.,

Mailing Address 1655 KNUDSON RUN

City  
THE VILLAGESState  
FLZip Code  
32163-5415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

347.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11A.27704508

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

109.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4020 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNGBLUT, JOANNE, M., DR.,**

Mailing Address 1655 KNUDSON RUN

City  
THE VILLAGESState  
FLZip Code  
32163-5415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27704510**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZAHORIAN, GEORGE, , , III**

Mailing Address 475 WEST GOVERNOR ROAD

City  
HERSHEYState  
PAZip Code  
17033-2217FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COCOA UROLOGY ASSOCIATESOccupation (for Individual)  
SURGEON UROLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11A.27702725**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11C.27704625**

Amount of Each Receipt this Period

68383.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

105.21



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4021 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABED, VICTOR, , ,**

Mailing Address 26 VISTA AVE

City  
TROY

State  
NY

Zip Code  
12180-5239

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
OWNER OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

**Transaction ID : SA11A.27706061**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAM

State  
NY

Zip Code  
10803-1457

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.47

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

**Transaction ID : SA11A.27706341**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AGEE, BILL, , ,**

Mailing Address 34542 CALLE PALOMA

City  
CAPISTRANO BEACH

State  
CA

Zip Code  
92624-1454

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
ARTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

333.58

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

**Transaction ID : SA11A.27705247**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

67.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4022 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AGEE, BILL, , ,**

Mailing Address 34542 CALLE PALOMA

City  
CAPISTRANO BEACHState  
CAZip Code  
92624-1454FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ARTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705253**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AGUILERA, ROBERT, A., MR.,**

Mailing Address 8185 BENEVENTO DR

City  
EL DORADO HILLSState  
CAZip Code  
95762-6217FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705193**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705063**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4023 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMYX, PATRICIA, H., MRS.,**

Mailing Address 4382 N ROSEPOINT AVE

City  
MERIDIANState  
IDZip Code  
83646-3702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705928**

Amount of Each Receipt this Period

18.74

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDREWS, WILLIAM, F., MR.,**

Mailing Address 1409 MORAN RD

City  
FRANKLINState  
TNZip Code  
37069-6301FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706316**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ARNOLD, FLORENCE, M., MS.,**

Mailing Address 231 N MANNING ST

City  
HILLSDALEState  
MIZip Code  
49242-1216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706483**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4024 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARNOLD, RUSSELL, , ,**

Mailing Address 966 BLUESTEM DRIVE

City  
GENEVAState  
ILZip Code  
60134-3732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704702

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARNOLD, RUSSELL, , ,**

Mailing Address 966 BLUESTEM DRIVE

City  
GENEVAState  
ILZip Code  
60134-3732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706088

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AVELINO, MARCIAL, , ,**

Mailing Address 728 CHATSWORTH DRIVE

City  
ACCOKEEKState  
MDZip Code  
20607-2003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

283.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704647

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

198.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4025 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BALDWIN, JAMES, , MR.,**

Mailing Address 9 MAURA LANE

City  
DANBURYState  
CTZip Code  
06810-7118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705587

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAMERT, TOM, , ,**

Mailing Address BOX 336

City  
IONEState  
CAZip Code  
95640-0336FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1402.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705720

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARLOW, DOUGLAS, , ,**

Mailing Address 1350 SHIPWATCH CIRCLE

City  
FERNANDINA BEACHState  
FLZip Code  
32034-6608FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705323

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4026 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARNES, PAUL, , ,**

Mailing Address 338 SUNSHINE WAY

City  
TURLOCKState  
CAZip Code  
95382-7373FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706685

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARNES, PAUL, , ,**

Mailing Address 338 SUNSHINE WAY

City  
TURLOCKState  
CAZip Code  
95382-7373FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706695

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARR, JONNA, , ,**

Mailing Address 4516 WEYBRIDGE DRIVE

City  
COLUMBIAState  
MOZip Code  
65203-6429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

349.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706289

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

83.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4027 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BASTEN, DAVID, , ,**

Mailing Address 2303 YORKTOWN AVENUE

City  
LYNCHBURGState  
VAZip Code  
24501-2146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
YMROccupation (for Individual)  
MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706473**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAYDALA, THOMAS, , ,**

Mailing Address 11 YORK ST

City  
MALVERNEState  
NYZip Code  
11565-2313FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BAY ENGINEERING SYSTEMSOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706636**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEAVERS, BRIAN, , ,**

Mailing Address 5 MCKINLEY AVENUE

City  
DERBYState  
CTZip Code  
06418-2415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706736**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

363.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4028 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BECK, ARNOLD, A., MR.,**

Mailing Address 300 FREDRICKSBURG CT. NE

City  
NORTH CANTONState  
OHZip Code  
44720-2575FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.06

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705886**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEIGHT, MARY, , ,**

Mailing Address 2442 RADCLIFFE AVE

City  
INDIANAPOLISState  
INZip Code  
46227-8655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.85

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705447**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BENNETT, JERRY, , ,**

Mailing Address 392 WEST STATE

City  
WAVERLYState  
ILZip Code  
62692-1062FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.50

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706097**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.41



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4029 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BENSON, PATTI, , ,**

Mailing Address PO BOX 158

City  
EUREKAState  
NVZip Code  
89316-0158FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706123

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERG, ELIZABETH, , ,**Mailing Address 555 MAIN ST  
APT 606SCity  
NEW YORKState  
NYZip Code  
10044-0165FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705820

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERNABE, MARIA, LOURDES, ,**

Mailing Address 11014 ELDORA AVE

City  
SUNLANDState  
CAZip Code  
91040-2005FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705582

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.54

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4030 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BERTAGNOLE, KARL, , ,

Mailing Address BOX 68

City  
WRIGHTState  
WYZip Code  
82732-0068FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRUTECHOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706378

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEST, SAMMY, L., ,

Mailing Address 1807 FM 3240

City  
BANDERAState  
TXZip Code  
78003-5233FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706687

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BETMAN, RACHEL, , ,

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705237

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

222.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4031 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705368

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705965

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706365

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

149.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4032 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BISHOP, DANNY, , ,**

Mailing Address 2050 W LAKE HAMILTON DR.

City  
WINTER HAVENState  
FLZip Code  
33881-9284FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704674**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704865**

Amount of Each Receipt this Period

76.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705070**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

204.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4033 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACK, LARRY, , ,**

Mailing Address 259 WHITE HERON DR.

City  
GEORGETOWNState  
TXZip Code  
78628-7272FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704974**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLACKSTONE, MICHAEL, , ,**

Mailing Address 2358 RIVERSIDE AVEVILLA RIVA 106

City  
JACKSONVILLEState  
FLZip Code  
32204-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MICHAEL BLACKSTONEOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705643**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLAHNIK, PATRICIA, C., ,**

Mailing Address 258 N WEST END BLVD, #312

City  
QUAKERTOWNState  
PAZip Code  
18951-2324FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

228.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706388**

Amount of Each Receipt this Period

7.81

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.63

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4034 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNE

State  
AL

Zip Code  
35967-5145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.05

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

**Transaction ID : SA11A.27706020**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNE

State  
AL

Zip Code  
35967-5145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.05

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

**Transaction ID : SA11A.27706023**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNE

State  
AL

Zip Code  
35967-5145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

343.05

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

**Transaction ID : SA11A.27706025**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

11.99

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4035 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BLYTHE, MARGARET, E., MRS.,

Mailing Address 160 CO. RD. 361

City  
FORT PAYNEState  
ALZip Code  
35967-5145FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706030

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOCSKAI, RITA, , ,

Mailing Address 515 APPLE TREE LANE

City  
MEADOW VISTAState  
CAZip Code  
95722-9598FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705393

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOGGS, JOHN, R., MR.,

Mailing Address 3900 RAILWAY AVENUE

City  
EVERETTState  
WAZip Code  
98201-3840FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DEEP SEA FISHERIESOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706032

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4036 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOSCH, KATHY, , ,**

Mailing Address 21 PETERS LANE

City  
WEST RUTLANDState  
VTZip Code  
05777-9510FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706581**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUCHER, PAUL, , ,**

Mailing Address 551 SW SANCTUARY DR.

City  
PORT SAINT LUCIEState  
FLZip Code  
34986-2043FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IWTOccupation (for Individual)  
PRESIDENT AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705815**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUCHER, PAUL, , ,**

Mailing Address 551 SW SANCTUARY DR.

City  
PORT SAINT LUCIEState  
FLZip Code  
34986-2043FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IWTOccupation (for Individual)  
PRESIDENT AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

913.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706497**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

202.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4037 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOWLER, DONALD, , ,**

Mailing Address PMB 8089

City  
SISTERSState  
ORZip Code  
97759-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705572

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMASState  
ORZip Code  
97015-8629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705943

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYDSTON, JANICE, , ,**

Mailing Address 2197 E ORIOLE DR.

City  
GILBERTState  
AZZip Code  
85297-2217FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705881

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

169.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4038 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRACKEN, KAY, , ,**

Mailing Address 405 HAMVASY

City  
TYLERState  
TXZip Code  
75701-5324FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRACKEN INTERESTOccupation (for Individual)  
OIL AND GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2334.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705085

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRENNAN, BERNARD, , ,**

Mailing Address P.O. BOX 1639

City  
PONTE VEDRA BEACHState  
FLZip Code  
32004-1639FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705900

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRICKER, DONALD, , ,**

Mailing Address 1532 CR 222

City  
DURANGOState  
COZip Code  
81303-8101FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

745.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705317

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

162.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4039 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROOKHART, PATRICIA, F., MS.,**Mailing Address 514 LIMERICK CIR  
UNIT 301City  
LUTHVLE TIMONState  
MDZip Code  
21093-8187FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

974.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2025

**Transaction ID : SA11A.27706594**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, AUGUSTA, , ,**

Mailing Address P.O. BOX 345

City  
DARRINGTONState  
WAZip Code  
98241-0345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2025

**Transaction ID : SA11A.27704763**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, DENNIS, , ,**

Mailing Address 3022 REDWOOD AVENUE

City  
LAKELANDState  
FLZip Code  
33803-4345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

642.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2025

**Transaction ID : SA11A.27704700**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4040 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706139**

Amount of Each Receipt this Period

0.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUCHANAN, JAMES, F., MR.,**

Mailing Address 217 ROSEBUD AVE

City  
CORPUS CHRISTIState  
TXZip Code  
78404-1734FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

WELDER LESHIN LLP

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705399**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURNS, MICHAEL, J., ,**

Mailing Address 7287 HORIZON DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3027FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.44

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705037**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4041 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURR, LAWRENCE, , MR.,**

Mailing Address 31065 CASTLE RIDGE DRIVE

City  
BROOKSVILLEState  
FLZip Code  
34602-7529FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705585**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUTZER, DONNA, , ,**

Mailing Address 943 WELKIN COURT

City  
CONWAYState  
SCZip Code  
29526-9275FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704866**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CALZADA, MARGARITA, Y., ,**

Mailing Address 11375 SAGE AVENUE

City  
FONTANAState  
CAZip Code  
92337-0119FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CHAPARRAL MEDICAL GROUPOccupation (for Individual)  
PATIENT SERVICES REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705743**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

58.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4042 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705239**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARNES, CALLAND, , ,**

Mailing Address 11078 SAFFOLD WAY

City  
RESTONState  
VAZip Code  
20190-3812FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705952**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704859**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4043 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARTWRIGHT, RONALD, , ,**

Mailing Address 2327 PAWLEY'S ISLAND PATH

City  
THE VILLAGESState  
FLZip Code  
32162-2315FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706472**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706579**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANA, MAGHAR, S., MR.,**

Mailing Address 315 MERCEDES LANE

City  
COLBURNState  
INZip Code  
47905-4566FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.51

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706621**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

261.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4044 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHOW, ADA, , ,**

Mailing Address 2100 TOWERS , PH1

City  
COCOA BEACHState  
FLZip Code  
32931-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705574

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHRESTENSEN, PAUL, , ,**

Mailing Address 148 EDGEMERE WAY S

City  
NAPLESState  
FLZip Code  
34105-7107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705238

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHRESTENSEN, PAUL, , ,**

Mailing Address 148 EDGEMERE WAY S

City  
NAPLESState  
FLZip Code  
34105-7107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

579.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705243

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

123.53



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4045 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHRESTENSEN, PAUL, , ,**

Mailing Address 148 EDGEMERE WAY S

City  
NAPLESState  
FLZip Code  
34105-7107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705248

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CIMINO, SHIRLEY, R., MS.,**

Mailing Address 44600 MONTEREY AVE. APT. A219

City  
PALM DESERTState  
CAZip Code  
92260-3368FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705115

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CIMINO, SHIRLEY, R., MS.,**

Mailing Address 44600 MONTEREY AVE. APT. A219

City  
PALM DESERTState  
CAZip Code  
92260-3368FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705628

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

61.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4046 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706154**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLAGGETT, RONALD, , ,**

Mailing Address 6440 SKY POINTE DR. 140-138

City  
LAS VEGASState  
NVZip Code  
89131-4047FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.72

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706000**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLARK, BARBARA, W., MRS.,**

Mailing Address 1170 GORDON COMBS RD NW

City  
MARIETTAState  
GAZip Code  
30064-1226FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ELEGANT IDEAS INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

562.22

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705784**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4047 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLARK, BARBARA, W., MRS.,**

Mailing Address 1170 GORDON COMBS RD NW

City  
MARIETTAState  
GAZip Code  
30064-1226FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ELEGANT IDEAS INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705795

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, BARBARA, W., MRS.,**

Mailing Address 1170 GORDON COMBS RD NW

City  
MARIETTAState  
GAZip Code  
30064-1226FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ELEGANT IDEAS INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705804

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLAUNCH, STEPHEN, , ,**

Mailing Address 4414 LIME AVE

City  
LONG BEACHState  
CAZip Code  
90807-2817FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706754

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

88.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4048 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONSTANTINE, RUSSELL, , ,**

Mailing Address 209 ROBIN HOOD DR

City  
COVINGTONState  
LAZip Code  
70433-4762FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.66

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705766**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIGO, JACQUELINE, L., MS.,**

Mailing Address 1049 SUMMIT DR

City  
MOUNT VERNONState  
OHZip Code  
43050-9576FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1371.80

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704843**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIGO, JACQUELINE, L., MS.,**

Mailing Address 1049 SUMMIT DR

City  
MOUNT VERNONState  
OHZip Code  
43050-9576FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1371.80

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706321**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4049 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAMPORN, ANN, , ,**

Mailing Address 6530 COUNTY ROAD 338

City  
CHIRENOState  
TXZip Code  
75937-3246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705987

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CROSS, MARION, , ,**

Mailing Address 8487 OLD MILITARY RD NE

City  
BREMERTONState  
WAZip Code  
98311-9256FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704788

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURTIS, KEVIN, , MR.,**

Mailing Address 3540 KELLOGG WAY

City  
SAN DIEGOState  
CAZip Code  
92106-3346FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CURTISOccupation (for Individual)  
MFGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706431

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

257.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4050 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURTIS, SUSAN, , ,**Mailing Address 19501 40TH AVE W  
UNIT 519City  
LYNNWOODState  
WAZip Code  
98036-5976FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705986**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705933**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DARLING, GARY, , ,**

Mailing Address 501 E GUIDRY ST

City  
COVINGTONState  
LAZip Code  
70433-3942FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

568.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705912**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4051 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAVIS, TINE, , ,**

Mailing Address 2210 BEACH BOULEVARD

City  
JACKSONVILLE BEACHState  
FLZip Code  
32250-2653FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

514.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706324**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAY, MICHAEL, F., ,**

Mailing Address 253 FARR AVE

City  
WADSWORTHState  
OHZip Code  
44281-2146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MDE,LLCOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705749**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAY, MICHAEL, F., ,**

Mailing Address 253 FARR AVE

City  
WADSWORTHState  
OHZip Code  
44281-2146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MDE,LLCOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705751**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4052 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAY, MICHAEL, F., ,**

Mailing Address 253 FARR AVE

City  
WADSWORTHState  
OHZip Code  
44281-2146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MDE,LLCOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

**Transaction ID : SA11A.27705755**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEANE, FREDERICK, R., DR.,**

Mailing Address 3696 COOK VALLEY BLVD SE

City  
GRAND RAPIDSState  
MIZip Code  
49546-8324FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

**Transaction ID : SA11A.27706362**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DESANTIS, PAUL, KUMP, MR.,**

Mailing Address 35060 CANNON RD

City  
BENTLEYVILLEState  
OHZip Code  
44022-3502FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

**Transaction ID : SA11A.27705978**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

195.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4053 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEYARMAN, GERALDINE, M., ,**

Mailing Address 2543 GRADWOHL RD

City  
TOLEDOState  
OHZip Code  
43617-1808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.08

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706480**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIMMITT, JAN, , ,**

Mailing Address 2517 W AVE K12

City  
LANCASTERState  
CAZip Code  
93536-1102FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704776**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOKKEN, KENNETH, , ,**

Mailing Address 12513 44TH DRIVE SOUTHEAST

City  
EVERETTState  
WAZip Code  
98208-9003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.42

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705895**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4054 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DONAT, NICOLETTA, , ,**Mailing Address 1841 CENTRAL PARK AVE  
APT 1GCity  
YONKERSState  
NYZip Code  
10710-2946FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

621.13

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705098**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOPSLAUF, BILLIE, G., MS.,**

Mailing Address 7198 JONES RD

City  
BRYANState  
TXZip Code  
77807-9780FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705433**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUGLE, THOMAS, C., MR.,**

Mailing Address 4605 JEANNES CT

City  
WEST CHESTERState  
OHZip Code  
45069-9293FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DELTEC INCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.46

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706035**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

194.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4055 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EASTMAN, STEVEN, , ,**

Mailing Address 6848 N GOVERNMENT WAY 114

City  
DALTON GARDENSState  
IDZip Code  
83815-7799FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.11

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704864**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EASTMAN, STEVEN, , ,**

Mailing Address 6848 N GOVERNMENT WAY 114

City  
DALTON GARDENSState  
IDZip Code  
83815-7799FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.11

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705001**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ECHOLS, DON, , ,**

Mailing Address 3461 JERROLD BLVD

City  
BRUNSWICKState  
OHZip Code  
44212-2225FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

416.30

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705818**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4056 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ECHOLS, DON, , ,**

Mailing Address 3461 JERROLD BLVD

City  
BRUNSWICKState  
OHZip Code  
44212-2225FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.30

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706527**

Amount of Each Receipt this Period

28.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-6174FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.64

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705294**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-6174FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

640.64

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706249**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4057 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-6174FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.64

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706257**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EDMUNDS, CHARLOTTE, , MS.,**

Mailing Address 13090 SOUTHAMPTON DR.

City  
BONITA SPRINGSState  
FLZip Code  
34135-3405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706199**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EDWARDS, BARBARA, H., MRS.,**

Mailing Address 509 THOMPkins LN

City  
EVANSState  
GAZip Code  
30809-4304FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705855**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

190.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4058 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELAS BOADO, MARIO, , ,**

Mailing Address 40120 SAGEWOOD DR

City  
PALM DESERTState  
CAZip Code  
92260-2321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705861**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELDER, JEAN, K., MR.,**

Mailing Address 462 ENCLAVE CT SE

City  
GRAND RAPIDSState  
MIZip Code  
49546-2169FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JKELDER & ASSOCIATES, INC.Occupation (for Individual)  
CEO/SENIOR PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705528**

Amount of Each Receipt this Period

56.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELKINS, EVA, P., MRS.,**Mailing Address 10375 WILSHIRE BLVD  
9GCity  
LOS ANGELESState  
CAZip Code  
90024-4750FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706361**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.84

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4059 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ESCOBEDO, MATTHEW, , ,**

Mailing Address 1323 E. LOMA VISTA ST.

City  
WEST COVINAState  
CAZip Code  
91790-1825FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EMANATE HEALTHOccupation (for Individual)  
IMAGING ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706765**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EVANS, LINDA, , ,**

Mailing Address 130 CRESCENT AVE. #306

City  
SUNNYVALEState  
CAZip Code  
94087-2765FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706758**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FAUCHER, MARK, , ,**

Mailing Address 5034 SEA DRIFT WAY

City  
SAN DIEGOState  
CAZip Code  
92154-8441FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FOSHAY ELECTRICOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706053**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

387.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4060 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAULL, DONNA, M., ,**

Mailing Address 502EAST SUMMIT STREET

City  
NORMALState  
ILZip Code  
61761-1430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705434**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FEE, REGINA, , ,**

Mailing Address 11 UNO LAGO DR

City

JUNO BEACH

State

FL

Zip Code

33408-2661

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705167**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FINDLAY, PEGGIE, A., DR.,**

Mailing Address 5314 EAKES ROAD NW

City

LOS RANCHOS

State

NM

Zip Code

87107-5534

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705781**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

128.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4061 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FINEGAN, JOHN, , ,**

Mailing Address 121 ABREGO MOUNT DRIVE

City  
FLORESVILLEState  
TXZip Code  
78114-6676FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

ZII

Occupation (for Individual)

ESTIMATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705615**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.84

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705255**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

655.84

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705259**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.38

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4062 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLANAGAN, BARBARA, , ,**

Mailing Address **N2592 SUMMERVILLE PARK ROAD**

City  
**LODI**

State  
**WI**

Zip Code  
**53555-9664**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**655.84**

Date of Receipt

**02 / 20 / 2025**

**Transaction ID : SA11A.27705261**

Amount of Each Receipt this Period

**8.91**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLANAGAN, BARBARA, , ,**

Mailing Address **N2592 SUMMERVILLE PARK ROAD**

City  
**LODI**

State  
**WI**

Zip Code  
**53555-9664**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**655.84**

Date of Receipt

**02 / 20 / 2025**

**Transaction ID : SA11A.27705262**

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLANAGAN, BARBARA, , ,**

Mailing Address **N2592 SUMMERVILLE PARK ROAD**

City  
**LODI**

State  
**WI**

Zip Code  
**53555-9664**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**655.84**

Date of Receipt

**02 / 20 / 2025**

**Transaction ID : SA11A.27705264**

Amount of Each Receipt this Period

**9.37**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**53.28**

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4063 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLANAGAN, BARBARA, , ,**

Mailing Address **N2592 SUMMERVILLE PARK ROAD**

City  
**LODI**

State  
**WI**

Zip Code  
**53555-9664**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

**RETIRED**

Occupation (for Individual)

**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**655.84**

Date of Receipt

**02 / 20 / 2025**

**Transaction ID : SA11A.27705266**

Amount of Each Receipt this Period

**36.44**

☐ Memo Item

**CONTRIBUTION**

**EARMARKED FROM WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLANAGAN, BARBARA, , ,**

Mailing Address **N2592 SUMMERVILLE PARK ROAD**

City  
**LODI**

State  
**WI**

Zip Code  
**53555-9664**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

**RETIRED**

Occupation (for Individual)

**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**655.84**

Date of Receipt

**02 / 20 / 2025**

**Transaction ID : SA11A.27705268**

Amount of Each Receipt this Period

**36.44**

☐ Memo Item

**CONTRIBUTION**

**EARMARKED FROM WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLETCHER, BRIAN, , ,**

Mailing Address **3900 E GREENHURST RD**

City  
**NAMPA**

State  
**ID**

Zip Code  
**83686-1334**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

**RETIRED**

Occupation (for Individual)

**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**208.20**

Date of Receipt

**02 / 20 / 2025**

**Transaction ID : SA11A.27704634**

Amount of Each Receipt this Period

**104.10**

☐ Memo Item

**CONTRIBUTION**

**EARMARKED FROM WINRED**

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**176.98**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4064 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLETCHER, DEIRDRE, , ,**

Mailing Address 913 HOLLEY LAKE RD

City  
AIKENState  
SCZip Code  
29803-2625FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706338

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FREELAND, JOHN, , ,**

Mailing Address 17383 HAXBY LANE

City  
WESTFIELDState  
INZip Code  
46074-3352FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705885

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FREELAND, JOHN, , ,**

Mailing Address 17383 HAXBY LANE

City  
WESTFIELDState  
INZip Code  
46074-3352FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

311.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705898

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4065 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FULLER, LOUIS, S., ,**

Mailing Address 9170 CHERRY HILL CT

City  
FORT MYERSState  
FLZip Code  
33908-3648FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705345

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GARCIA, JOSEPH, , ,**

Mailing Address 9 HOLLY STREET

City  
RUMSONState  
NJZip Code  
07760-1716FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705226

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GARDNER, MARIO, , ,**

Mailing Address 39755 BERKEY DRIVE, B

City  
PALM DESERTState  
CAZip Code  
92211-1106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RESORT PARKING SERVICES, INC.Occupation (for Individual)  
PARKING CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705739

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

308.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4066 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIFFORD, KEVIN, , ,**

Mailing Address 786 HORNET DRIVE

City  
GARDNERVILLEState  
NVZip Code  
89460-8323FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706672

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLOVER, AVERIL, , ,**

Mailing Address 446 LANCASHIRE RUN

City  
SMITHFIELDState  
NCZip Code  
27577-8029FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705514

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOETERS, CHARLOTTE, , ,**

Mailing Address 5122 SANDYFIELDS LANE

City  
KATYState  
TXZip Code  
77494-2329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HCCSOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705904

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

181.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4067 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOLDEN, JUDEE, , ,**

Mailing Address 11007 OLEANDER DRIVE

City  
CLERMONTState  
FLZip Code  
34711-8413FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705288**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOMBERG, GALINA, , ,**

Mailing Address 96 CARRICK CIR.

City  
HAYWARDState  
CAZip Code  
94542-7912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1414.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705042**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GONZALES, LYNNE, , ,**

Mailing Address 597 LOST RD

City  
LORENAState  
TXZip Code  
76655-4404FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705097**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

234.23

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4068 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADE

State  
FL

Zip Code  
33841-9531

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

**02** / **20** / **2025**

**Transaction ID : SA11A.27705004**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADE

State  
FL

Zip Code  
33841-9531

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

**02** / **20** / **2025**

**Transaction ID : SA11A.27706492**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORE, TRINA, , ,**

Mailing Address 14321 SOUTHWEST 20TH STREET

City  
DAVIE

State  
FL

Zip Code  
33325-5426

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1001.42

Date of Receipt

**02** / **20** / **2025**

**Transaction ID : SA11A.27706436**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

28.11



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4069 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GORE, TRINA, , ,

Mailing Address 14321 SOUTHWEST 20TH STREET

City  
DAVIEState  
FLZip Code  
33325-5426FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706556

Amount of Each Receipt this Period

24.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOTELLI, ANDREW, , ,

Mailing Address 2925 EVENING ROCK STREET

City

LAS VEGAS

State

NV

Zip Code

89135-1633

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705008

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOTTLIEB, STEPHEN, , ,

Mailing Address 705 CORELLI COVE ST

City

HENDERSON

State

NV

Zip Code

89011-5523

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

346.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706269

Amount of Each Receipt this Period

20.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

149.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4070 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705772

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705774

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705775

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4071 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705776

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705777

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705780

Amount of Each Receipt this Period

4.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8.38

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4072 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRANDSINGER, PEGGY, , ,**

Mailing Address 5501 WEST HILDEBRAND BLVD #208

City  
KENNEWICKState  
WAZip Code  
99338-1975FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704964

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRANUM, GREGORY, , ,**

Mailing Address 1335 CRESTVIEW DR.

City  
ALPENAState  
MIZip Code  
49707-1105FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706069

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREENSTEIN, LORRAINE, , ,**

Mailing Address 162 ADAMS STREET

City  
DENVERState  
COZip Code  
80206-5239FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PROPERTY MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706729

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

179.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4073 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598-2323FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704877

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705435

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROVER, JANICE, , ,**

Mailing Address 173 HIGH STREET

City  
PACHECOState  
CAZip Code  
94553-5505FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705358

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4074 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRUENDEL, LIZ, , ,**

Mailing Address 460 COUNTY ROAD 5170

City  
SALEMState  
MOZip Code  
65560-7302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1090.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705646

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HABETLER, ANNA, M., ,**

Mailing Address 7660 ROWENA ST

City  
SAN DIEGOState  
CAZip Code  
92119-1245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705298

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERYState  
ALZip Code  
36117-7558FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

854.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706391

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

164.10

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4075 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAGER, ROY, , ,**

Mailing Address **8653 LILLIAN PLACE**

City  
**MONTGOMERY**

State  
**AL**

Zip Code  
**36117-7558**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**854.63**

Date of Receipt

**02 / 20 / 2025**

**Transaction ID : SA11A.27706395**

Amount of Each Receipt this Period

**9.90**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAGER, ROY, , ,**

Mailing Address **8653 LILLIAN PLACE**

City  
**MONTGOMERY**

State  
**AL**

Zip Code  
**36117-7558**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**854.63**

Date of Receipt

**02 / 20 / 2025**

**Transaction ID : SA11A.27706398**

Amount of Each Receipt this Period

**10.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAGER, ROY, , ,**

Mailing Address **8653 LILLIAN PLACE**

City  
**MONTGOMERY**

State  
**AL**

Zip Code  
**36117-7558**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**854.63**

Date of Receipt

**02 / 20 / 2025**

**Transaction ID : SA11A.27706402**

Amount of Each Receipt this Period

**47.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**66.90**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4076 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAHNEMANN, ARTUR, , ,**

Mailing Address 4510 140TH AVE SE

City  
BELLEVUEState  
WAZip Code  
98006-2343FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.30

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706694**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMBY, CAROLYN, T., MS.,**

Mailing Address 685 W KITCHEN DR.

City  
PORT NECHESState  
TXZip Code  
77651-5321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.04

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706244**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMBY, CAROLYN, T., MS.,**

Mailing Address 685 W KITCHEN DR.

City  
PORT NECHESState  
TXZip Code  
77651-5321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

456.04

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706252**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.89



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4077 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMLIN, WADE, , ,**

Mailing Address 3830 BRONDT RD

City  
ELLENSBURGState  
WAZip Code  
98926-9685FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FORESTRY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.86

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706167**

Amount of Each Receipt this Period

239.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAN, NAM, , ,**

Mailing Address 17315 INDIGO MIST COURT

City  
HOUSTONState  
TXZip Code  
77084-1987FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF INDEPENDENT AGENTOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706680**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAND, THOMAS, , ,**

Mailing Address 13828 N LOBELIA WAY

City  
ORO VALLEYState  
AZZip Code  
85755-7073FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704823**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

393.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4078 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HANSEN, JUDY, , MRS.,

Mailing Address P.O.BOX 4213

City  
SHOW LOWState  
AZZip Code  
85902-4213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705013

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HANSEN, JUDY, , MRS.,

Mailing Address P.O.BOX 4213

City  
SHOW LOWState  
AZZip Code  
85902-4213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705036

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARRAH, TONY, , ,

Mailing Address 355 BOXINGTON WAY

City  
SPARKSState  
NVZip Code  
89434-8904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2456.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706337

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

134.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4079 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRIS, KAREN, , ,**

Mailing Address 266 PONTA HILLS RD

City  
MERIDIANState  
MSZip Code  
39305-8223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.60

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704858**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, BARBARA, A., MS.,**

Mailing Address 9112 W 131ST TER.

City  
OVERLAND PARKState  
KSZip Code  
66213-3096FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.95

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705107**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, BARBARA, A., MS.,**

Mailing Address 9112 W 131ST TER.

City  
OVERLAND PARKState  
KSZip Code  
66213-3096FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

213.95

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705216**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.30

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4080 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HART, LEEANN, , ,

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705071

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HART, LEEANN, , ,

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706371

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARWARD, JAMES, , ,

Mailing Address 322 NEW KENT PLACE

City  
CARYState  
NCZip Code  
27511-4584FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

493.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704816

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

7.04

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4081 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARWARD, JAMES, , ,**

Mailing Address 322 NEW KENT PLACE

City  
CARY

State  
NC

Zip Code  
27511-4584

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.88

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

**Transaction ID : SA11A.27705479**

Amount of Each Receipt this Period

0.45

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEATH, DARWIN, , ,**

Mailing Address P.O. BOX 16

City

SOUTH DENNIS

State

MA

Zip Code

02660-0016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.81

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

**Transaction ID : SA11A.27704744**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEATH, DARWIN, , ,**

Mailing Address P.O. BOX 16

City

SOUTH DENNIS

State

MA

Zip Code

02660-0016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

292.81

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

**Transaction ID : SA11A.27704782**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4082 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEATH, DARWIN, , ,**

Mailing Address P.O. BOX 16

City  
SOUTH DENNISState  
MAZip Code  
02660-0016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.81

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

Transaction ID : SA11A.27704884

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEATH, DARWIN, , ,**

Mailing Address P.O. BOX 16

City  
SOUTH DENNISState  
MAZip Code  
02660-0016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.81

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

Transaction ID : SA11A.27704886

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HELFRICH, STEVEN, , ,**

Mailing Address 1911 COVEY TRACE ROAD

City  
LA GRANGEState  
KYZip Code  
40031-9248FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

Transaction ID : SA11A.27706656

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.08

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4083 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HEMBREE, WILLIAM, L., MR.,

Mailing Address 2626 BLUE MOUNTAIN TRL

City  
LYONSState  
COZip Code  
80540-8461FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705116

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HENDERSON, RAYMOND, , ,

Mailing Address 6200 ATTALA ROAD 1106

City

KOSCIUSKO

State

MS

Zip Code

39090-6217

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1058.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706303

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEWETT, WILLIAM, , MR.,

Mailing Address 8920 E QUAIL COVE LN

City

GOLD CANYON

State

AZ

Zip Code

85118-3009

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705596

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4084 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILES, SHELLEY, , ,**

Mailing Address 2737 COUNTY STREET 2950

City  
BLANCHARDState  
OKZip Code  
73010-4231FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705449**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, RICHARD, , ,**

Mailing Address 8085 SMOKING JACKET PL

City  
LAS VEGASState  
NVZip Code  
89166-3792FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704653**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705482**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4085 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIMANGO, GERRY, , ,**

Mailing Address 14979 WOODLAND PARK DRIVE

City  
FOREST RANCHState  
CAZip Code  
95942-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705179

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOFF, JOHN, , ,**

Mailing Address 2201 W. SINTO

City  
SPOKANEState  
WAZip Code  
99201-2946FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705685

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLTEN, JAMES, J., MR.,**

Mailing Address 4003 CHESTNUT OAK DR

City  
SMITHTONState  
ILZip Code  
62285-3741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1366.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706359

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4086 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HORN, HOBY, R., MR.,**

Mailing Address PO BOX 6145

City  
MOOREState  
OKZip Code  
73153-0145FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705154**

Amount of Each Receipt this Period

990.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUDSPETH, WILLIAM, , ,**

Mailing Address 605 HILLVIEW PLACE

City  
LEESBURGState  
VAZip Code  
20175-5095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705029**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUDSPETH, WILLIAM, , ,**

Mailing Address 605 HILLVIEW PLACE

City  
LEESBURGState  
VAZip Code  
20175-5095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

507.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705959**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1065.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4087 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUNT, SUSAN, , ,**

Mailing Address 522 N CANADIAN TER

City  
MUSTANGState  
OKZip Code  
73064-6105FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706469

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HURD, RICKEY, , ,**

Mailing Address 40120 COUNTY ROAD 2

City  
WAGNERState  
SDZip Code  
57380-7254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706291

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUTSON, D, RUTH, ,**

Mailing Address 509 CRYSTAL SPRINGS CIRCLE

City  
JOHNSON CITYState  
TNZip Code  
37615-2356FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704965

Amount of Each Receipt this Period

10.42

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4088 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACOBS, JEAN, K., ,**

Mailing Address 1141 STEAMBOAT RUN ROAD

City  
SHEPHERDSTOWNState  
WVZip Code  
25443-4132FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704961

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACOBS, MICHAEL, , ,**Mailing Address 3 WHITE OAK DR.  
APT CCity  
SMITHFIELDState  
NCZip Code  
27577-4872FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705846

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAMES, JERRY, G., MR.,**

Mailing Address 409-42 AVE.

City  
GREELEYState  
COZip Code  
80634-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
O-IOccupation (for Individual)  
MOLD TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

261.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705727

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.03

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4089 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JAMES, JERRY, G., MR.,

Mailing Address 409-42 AVE.

City  
GREELEYState  
COZip Code  
80634-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
O-IOccupation (for Individual)  
MOLD TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706305

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JEFFERY, ROGER, , MR.,

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705476

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JEFFERY, ROGER, , MR.,

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705477

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

36.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4090 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705480**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705483**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705497**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4091 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JENNINGS, PAULA, , ,**

Mailing Address 122 QUAIL RUN DR.

City

WARNER ROBINS

State

GA

Zip Code

31088-6504

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

656.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706191**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, ANN, W., MRS.,**

Mailing Address 444 POLIHALE WAY

City

NAPLES

State

FL

Zip Code

34114-8351

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

256.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706570**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, DELORES, A., MS.,**

Mailing Address 18 MUIRFIELD VILLAGE CT.

City

SUMMERVILLE

State

SC

Zip Code

29483-5093

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RET

Occupation (for Individual)

RET

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

488.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706177**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4092 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, DELORES, A., MS.,**

Mailing Address 18 MUIRFIELD VILLAGE CT.

City  
SUMMERVILLEState  
SCZip Code  
29483-5093FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706179**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, DELORES, A., MS.,**

Mailing Address 18 MUIRFIELD VILLAGE CT.

City  
SUMMERVILLEState  
SCZip Code  
29483-5093FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706180**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, DELORES, A., MS.,**

Mailing Address 18 MUIRFIELD VILLAGE CT.

City  
SUMMERVILLEState  
SCZip Code  
29483-5093FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

488.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706182**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

29.90



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4093 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, DELORES, A., MS.,**

Mailing Address 18 MUIRFIELD VILLAGE CT.

City  
SUMMERVILLEState  
SCZip Code  
29483-5093FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.05

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706187**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, KAY, , ,**

Mailing Address 800 NAVAJO AVE

City  
FORT MORGANState  
COZip Code  
80701-4081FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.15

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704793**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.29

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706745**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4094 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706746**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706748**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, KARON, , ,**

Mailing Address 1345 165TH ST

City  
FORT SCOTTState  
KSZip Code  
66701-8344FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705365**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4095 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, KARON, , ,**

Mailing Address 1345 165TH ST

City  
FORT SCOTTState  
KSZip Code  
66701-8344FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706415**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KATHMAN, ROBERT, , ,**

Mailing Address 1703 CLUBHOUSE HILL DRIVE

City  
SPICEWOODState  
TXZip Code  
78669-1359FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706001**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEMP, KIRKLAND, , ,**

Mailing Address 2188 WASHINGTON AVE

1

City  
BRONXState  
NYZip Code  
10457-2589FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705452**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4096 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KENNEDY, MARY, , ,**

Mailing Address 1616 MAPLE AVENUE

City  
NOBLESVILLEState  
INZip Code  
46060-3014FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704626**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KINKLEY, GARY, A., MR.,**

Mailing Address P.O. BOX 450

City  
BLAIRSDEN GRAEAGLEState  
CAZip Code  
96103-0450FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706008**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNUTSON, TERRY, , ,**

Mailing Address 1562 EDGEWOOD DRIVE

City  
LODIState  
CAZip Code  
95240-0453FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

481.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706168**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4097 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUHN, ROBERT, , ,**

Mailing Address 3718 LANGTRY DR

City  
AMARILLOState  
TXZip Code  
79109-3926FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705819**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704727**

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705577**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4098 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAMPING, DOUG, R., MR.,**

Mailing Address 1433 SOUTH 35 EAST

City  
FARMINGTONState  
UTZip Code  
84025-2004FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UDCOccupation (for Individual)  
CO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706176**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LARUE, PATRICIA, , ,**

Mailing Address 3137-B GOLDEN YEARS HOMESTEAD DR

City  
NEW HAVENState  
INZip Code  
46774-3003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705831**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAVERDIERE, RAYMOND, , ,**

Mailing Address 1517 CAMDEN WOODS TERRACE

City  
SAINT CLOUDState  
MNZip Code  
56301-9662FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705809**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4099 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEBRET, ARTHUR, M., ,**

Mailing Address 621 S FREYA ST

City  
SPOKANEState  
WAZip Code  
99202-5138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705692**

Amount of Each Receipt this Period

21.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEBRET, ARTHUR, M., ,**

Mailing Address 621 S FREYA ST

City  
SPOKANEState  
WAZip Code  
99202-5138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706075**

Amount of Each Receipt this Period

21.07

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEE, RUBY, , ,**

Mailing Address 92430 LEIOLE ST

City  
KAPOLEIState  
HIZip Code  
96707-1008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704712**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4100 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWIS, JENNY, BAUM, MS.,**

Mailing Address 3197 HARVEST MOON DRIVE

City  
PALM HARBORState  
FLZip Code  
34683-2125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FISOccupation (for Individual)  
SR. DIRECTOR PRODUCT DEVELOPI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706666

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706418

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LITTLE, CHARLES, E., ,**

Mailing Address 2373 LEDGEWOOD DR

City  
COLORADO SPRINGSState  
COZip Code  
80921-7010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706078

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4101 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOGAN, RODGER, , ,**

Mailing Address 10647 SKI CHASTE LN

City  
AXISState  
ALZip Code  
36505-4206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.65

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706056**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOHMAN, CAROLYN, , ,**

Mailing Address 3229 WALNUT CREEK CT

City  
BRYANState  
TXZip Code  
77807-4852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.59

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705093**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOHMAN, CAROLYN, , ,**

Mailing Address 3229 WALNUT CREEK CT

City  
BRYANState  
TXZip Code  
77807-4852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

615.59

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705927**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4102 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LONG, RICHARD, , ,**

Mailing Address 3445 EMERALD ST

City  
TORRANCEState  
CAZip Code  
90503-3704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705589

Amount of Each Receipt this Period

182.18

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOWRY, RANDY, K., MR.,**

Mailing Address 15914 RATHLIN CT

City  
SPRINGState  
TXZip Code  
77379-6887FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNION GASOccupation (for Individual)  
OIL AND GAS SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705701

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705473

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

223.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4103 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUMBER, MICHAEL, , MR.,**

Mailing Address 23077 SOUTHWEST NEWLAND ROAD

City  
WILSONVILLEState  
ORZip Code  
97070-6701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705954**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACARIO, KELLI, , ,**

Mailing Address 27136 SOUTH INDIAN ROAD

City  
PARK HILLState  
OKZip Code  
74451-3022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705810**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACDONALD, CARROLL, , ,**

Mailing Address 33575 N DOVE LAKES DR

City  
CAVE CREEKState  
AZZip Code  
85331-4102FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705498**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4104 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACUMBER, THOMAS, , ,**

Mailing Address 443 SLATE STREET

City  
CHESAPEAKEState  
VAZip Code  
23322-1705FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705082**

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MADDOCKS, WILLIAM, , ,**

Mailing Address PO BOX 908

City  
SCHERERVILLEState  
INZip Code  
46375-0908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706553**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAGUIRE, SUSAN, LEE, ,**

Mailing Address P.O. BOX 729

City  
LARAMIEState  
WYZip Code  
82073-0729FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

243.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705657**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4105 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAGUIRE, SUSAN, LEE, ,**

Mailing Address P.O. BOX 729

City  
LARAMIEState  
WYZip Code  
82073-0729FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.87

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705661**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAGUIRE, SUSAN, LEE, ,**

Mailing Address P.O. BOX 729

City  
LARAMIEState  
WYZip Code  
82073-0729FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.87

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705663**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MALUKAS, DAIVA, , ,**

Mailing Address 8130 LAKE RIDGE DR.

City  
BURR RIDGEState  
ILZip Code  
60527-5975FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HMDOccupation (for Individual)  
V.P

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

920.50

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705450**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4106 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANSELL, HELEN, , ,**

Mailing Address 85 CHAFFIN RD.

City  
ROSWELLState  
GAZip Code  
30075-2425FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FULTON COUNTY BE OF EDUCOccupation (for Individual)  
TRANSPORTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706375**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANSO, PETER, , ,**

Mailing Address 7301 DOVER LANE

City  
PARKLANDState  
FLZip Code  
33067-1646FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LBBSOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705156**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANTHEI, LEAH, , MS.,**

Mailing Address 46646 COUNTY ROAD 613

City  
NASHWAUKState  
MNZip Code  
55769-4515FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704663**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

374.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4107 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARSH, ALANA, , ,**

Mailing Address 4275 PANORAMIC VIEW DRIVE

City  
MARYVILLEState  
TNZip Code  
37804-3982FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705151**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTENS, JIM, , ,**

Mailing Address 6634 BUDDY MILLER DRIVE

City  
ALVATONState  
KYZip Code  
42122-9610FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706539**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, EDWARD, S., MR.,**Mailing Address 112 MARWOOD RD  
APT 4237City  
CABOTState  
PAZip Code  
16023-2259FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1784.20

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706665**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4108 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705384**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706476**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASSEI, DIANE, S., ,**

Mailing Address 6905 SWEETWATER DR.

City  
PLANOState  
TXZip Code  
75023-1842FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.16

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704855**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.95



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4109 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASSEI, DIANE, S., ,**

Mailing Address 6905 SWEETWATER DR.

City  
PLANOState  
TXZip Code  
75023-1842FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704891

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705096

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATEER, RAYMOND, , ,**

Mailing Address 1278 MATEER RD

City  
KITTANNINGState  
PAZip Code  
16201-8024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

264.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705010

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4110 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATHEWS, ASTRIDA, , ,**

Mailing Address 26905 W WAHALLA LN

City  
BUCKEYEState  
AZZip Code  
85396-2337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706203**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATHIS, DENE, , MRS.,**

Mailing Address 402 N. EVERGREEN

City  
ARLINGTON HEIGHTSState  
ILZip Code  
60004-6008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705974**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCABE, DANIEL, M., MR.,**

Mailing Address 239 WEST TRAIL

City  
STAMFORDState  
CTZip Code  
06903-2407FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

379.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704913**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4111 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCREA, JAMES, , MR.,**Mailing Address 50 RELIANCE RD  
LOT 40City  
ROCK SPRINGSState  
WYZip Code  
82901-9718FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706055**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCGAVOCK, VICKI, , ,**

Mailing Address 4004 109TH ST

City  
LUBBOCKState  
TXZip Code  
79423-0880FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705719**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCGREEVY, KEVIN, J., MR.,**

Mailing Address 2161 CHAIN BRIDGE RD

City  
VIENNAState  
VAZip Code  
22182-6033FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NETWORK DESIGNS INC.Occupation (for Individual)  
EXEC VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705173**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4112 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCNAMARA, PATRICK, , ,**

Mailing Address 4750 W PASEO DE LAS COLINAS

City  
TUCSONState  
AZZip Code  
85745-9240FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TRETCHOK MCNAMARA & MILLEROccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.97

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704939**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNEESE, PATRICK, , ,**

Mailing Address 6912 EAST 53RD PLACE

City  
TULSAState  
OKZip Code  
74145-7505FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.98

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705560**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCNEIL, COLLIN, , ,**

Mailing Address 1701 HORSESHOE TRAIL

City  
CHESTER SPRINGSState  
PAZip Code  
19425-1814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

801.71

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706771**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

153.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4113 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEEHAN, JOAN, , ,**

Mailing Address 2874 GOLDEN GATE AVE

City  
SAN FRANCISCOState  
CAZip Code  
94118-4111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1962.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705524**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEREDITH, RANDY, , ,**

Mailing Address 266 BULLFINCH ROAD

City  
MOORESVILLEState  
NCZip Code  
28117-5407FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1978.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705206**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILES, DIANNE, E., MRS.,**

Mailing Address 2661 TALLANT RD, C898

City  
SANTA BARBARAState  
CAZip Code  
93105-4839FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

708.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705073**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4114 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, ANNE, , ,**

Mailing Address 6 RONNA RD

City  
GLOUCESTERState  
MAZip Code  
01930-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1006.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705389

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, COLLEEN, , ,**

Mailing Address 5400 LIKINI ST, APT. 303

City  
HONOLULUState  
HIZip Code  
96818-1731FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HAWAIIAN ELECTRICOccupation (for Individual)  
RATE ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705527

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELLState  
NMZip Code  
88201-8659FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705551

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

71.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4115 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELLState  
NMZip Code  
88201-8659FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.16

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706104**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MINA, BRUCE, , ,**

Mailing Address 555 BROADHOLLOW ROAD STE 404

City  
MELVILLEState  
NYZip Code  
11747-5001FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MINA LLANO HIGGINS GROUP LLPOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.30

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705579**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOLENDORP, DAYTON, , MR.,**

Mailing Address 6507 CASTLE KNOLL COURT

City  
INDIANAPOLISState  
INZip Code  
46250-1439FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

585.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706481**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4116 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOORE, BENTON, , ,**

Mailing Address 7810 N. RIDGELAND DR.

City  
INDIANAPOLISState  
INZip Code  
46250-2269FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704666**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORASKI, ROBERT, L., ,**

Mailing Address 1565 LONG CREEK RD

City  
GREENEVILLEState  
TNZip Code  
37743-8259FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

998.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704996**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORGAN, DAVID, G., ,**Mailing Address 4412 ISLAND PLACE  
104City  
ANNANDALEState  
VAZip Code  
22003-4885FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

301.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704827**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

236.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4117 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUFFERI, SAMUEL, C., MR.,**

Mailing Address 6421 MILL RD

City  
EGG HARBOR TWPState  
NJZip Code  
08234-4923FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704805**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MULOCK, KAREN, A., MS.,**

Mailing Address 4005 N 162ND ST

City  
BROOKFIELDState  
WIZip Code  
53005-1426FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705101**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

955.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704672**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

194.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4118 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, MICHAEL, , ,**

Mailing Address 1433 W. ROSELAWN AVE.

City  
ROSEVILLEState  
MNZip Code  
55113-5823FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

Transaction ID : SA11A.27706135

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURRAY, MICHAEL, , ,**

Mailing Address 1433 W. ROSELAWN AVE.

City  
ROSEVILLEState  
MNZip Code  
55113-5823FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

Transaction ID : SA11A.27706137

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, MICHAEL, , ,**

Mailing Address 1433 W. ROSELAWN AVE.

City  
ROSEVILLEState  
MNZip Code  
55113-5823FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

Transaction ID : SA11A.27706141

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4119 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUSE, TAMMIE, , ,**

Mailing Address 7420 COUNTS MASSIE RD

City  
MAUMELLEState  
ARZip Code  
72113-6652FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.88

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705879**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, PAUL, , ,**

Mailing Address 6803 NORTH 68TH PLAZA

City  
OMAHAState  
NEZip Code  
68152-2177FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.18

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704896**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEWCOMB, LAURA, , ,**

Mailing Address 5900 S GEMSTONE DR

City  
CHANDLERState  
AZZip Code  
85249-5803FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.50

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706028**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

360.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4120 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NICHOLS, PHIL, , ,**

Mailing Address 407 WEST CORNELL STREET

City  
AVON PARKState  
FLZip Code  
33825-3700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1266.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704682**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIELSEN, CHARLOTTE, , ,**

Mailing Address 163 44TH PLACE NE

City  
SALEMState  
ORZip Code  
97301-5121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705932**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NIELSEN, CHARLOTTE, , ,**

Mailing Address 163 44TH PLACE NE

City  
SALEMState  
ORZip Code  
97301-5121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705938**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

227.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4121 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOTTINGHAM, MARGARETE, , ,**

Mailing Address PO BOX 236

City  
CARTERState  
MTZip Code  
59420-0236FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.18

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704629**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O' CONNOR, EDWARD, R., ,**

Mailing Address 3849 BROAD ST

City

PHIL CAMPBELL

State

AL

Zip Code

35581-3739

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705297**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'FLYNN, ARMINDA, , ,**

Mailing Address 12864 BISCAYNE BLVD

City

N. MIAMI

State

FL

Zip Code

33181-2007

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

992.53

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706383**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4122 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ODOM, TAMELA, , ,**

Mailing Address 403 SANFORD ROAD

City  
ANDALUSIAState  
ALZip Code  
36420-4121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705295

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OHANLON, MICHAEL, , ,**

Mailing Address 106 HAWK CT

City  
MECHANICSBURGState  
PAZip Code  
17050-2058FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705134

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAGANINI, KAREN, , MS.,**

Mailing Address 8863 ROBIN LN

City  
KIRTLANDState  
OHZip Code  
44094-9768FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
K&DOccupation (for Individual)  
PROPERTY MANAGEMENT & DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705854

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

87.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4123 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705310

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705316

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705332

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4124 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PASSAROTTI, DONNA, , ,**

Mailing Address 23 EBERSOHL CIR

City  
WHITEHOUSE STATIONState  
NJZip Code  
08889-4027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704922**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705338**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706263**

Amount of Each Receipt this Period

2.38

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4125 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETITJEAN, SANDRA, , ,**

Mailing Address 6832 TAMARA LANE

City  
ASSARIAState  
KSZip Code  
67416-8875FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705538**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETRITZ, GEORGE, L., ,**

Mailing Address 4811 ROGERS ROAD

City  
BEULAHState  
MIZip Code  
49617-9562FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706749**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704874**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4126 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PINKERTON, EILEEN, R., MS.,**

Mailing Address 3340 GREGORY DR W

City  
BILLINGSState  
MTZip Code  
59102-0597FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DECORATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.96

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706684**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POPE, EDWARD, , ,**

Mailing Address 354 E EMBASSY ST

City  
TEMPEState  
AZZip Code  
85288-1316FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.94

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705666**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POST, PATRICIA, , ,**

Mailing Address 3517 SILVERWOOD CT

City  
BEDFORDState  
TXZip Code  
76021-3048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.88

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704988**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.53

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4127 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POWELL, SCOTT, , MR.,**

Mailing Address PO BOX 3234

City  
PONTE VEDRA BEACH

State  
FL

Zip Code  
32004-3234

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

518.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

**Transaction ID : SA11A.27705487**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POWELL, SCOTT, , MR.,**

Mailing Address PO BOX 3234

City  
PONTE VEDRA BEACH

State  
FL

Zip Code  
32004-3234

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

518.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

**Transaction ID : SA11A.27705832**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RANSOM, JAMES, H., DR.,**

Mailing Address 319 WOODLAND RD.

City  
SEWICKLEY

State  
PA

Zip Code  
15143-1048

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

890.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

**Transaction ID : SA11A.27706592**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

113.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4128 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REAGAN, RONALD, C., ,**

Mailing Address 1783 FOUR MILE COVE PKWY

City  
CAPE CORALState  
FLZip Code  
33990-2409FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706760

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REISS, CLAIRE, K., MRS.,**Mailing Address 464 PROSPECT STREET  
UNIT 501City  
LA JOLLAState  
CAZip Code  
92037-4742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1431.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706732

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REISS, CLAIRE, K., MRS.,**Mailing Address 464 PROSPECT STREET  
UNIT 501City  
LA JOLLAState  
CAZip Code  
92037-4742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1431.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706733

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

77.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4129 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REISS, CLAIRE, K., MRS.,**Mailing Address **464 PROSPECT STREET**  
**UNIT 501**City  
**LA JOLLA**State  
**CA**Zip Code  
**92037-4742**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1431.74**

Date of Receipt

**02 / 20 / 2025****Transaction ID : SA11A.27706734**

Amount of Each Receipt this Period

**10.43**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REISS, CLAIRE, K., MRS.,**Mailing Address **464 PROSPECT STREET**  
**UNIT 501**City  
**LA JOLLA**State  
**CA**Zip Code  
**92037-4742**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1431.74**

Date of Receipt

**02 / 20 / 2025****Transaction ID : SA11A.27706735**

Amount of Each Receipt this Period

**36.44**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REISS, CLAIRE, K., MRS.,**Mailing Address **464 PROSPECT STREET**  
**UNIT 501**City  
**LA JOLLA**State  
**CA**Zip Code  
**92037-4742**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**1431.74**

Date of Receipt

**02 / 20 / 2025****Transaction ID : SA11A.27706738**

Amount of Each Receipt this Period

**78.08**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►**124.95**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4130 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICARDI, RICHARD, , ,**

Mailing Address 2 HADLEY LANE

City  
WESTBOROUGHState  
MAZip Code  
01581-1226FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MARSHALLSOccupation (for Individual)  
STOCK ROOM ASSOCIATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704828

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBERTS, RICHARD, J., MR.,**

Mailing Address 12418 FOX HOLLOW

City  
BAKERSFIELDState  
CAZip Code  
93312-3606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705326

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705244

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

244.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4131 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROE, JOAN, , MRS.,**

Mailing Address 360 W NOKOMIS CT

City  
FOX POINTState  
WIZip Code  
53217-2611FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704640**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROE, RICHARD, , ,**

Mailing Address 4841 WOODMAN AVE

City  
SHERMAN OAKSState  
CAZip Code  
91423-2441FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706674**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, NATALIE, , ,**Mailing Address 1263 1ST ST. SE  
1118City  
WASHINGTONState  
DCZip Code  
20003-4538FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SUBJECT MATTEROccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705919**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

432.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4132 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704897

Amount of Each Receipt this Period

2.38

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705089

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705598

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4.88



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4133 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORD

State  
NH

Zip Code  
03301-5847

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

**Transaction ID : SA11A.27705851**

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORD

State  
NH

Zip Code  
03301-5847

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

**Transaction ID : SA11A.27705914**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORD

State  
NH

Zip Code  
03301-5847

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

**Transaction ID : SA11A.27706211**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4134 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706253

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705998

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705362

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4135 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUNALDUE, DONALD, , MR.,**

Mailing Address 32 PLANTATION DR.

City  
SOUTHERN PINESState  
NCZip Code  
28387-2967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705941**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVERState  
NJZip Code  
08882-1908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704681**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVERState  
NJZip Code  
08882-1908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705184**

Amount of Each Receipt this Period

2.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4136 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVERState  
NJZip Code  
08882-1908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706591**

Amount of Each Receipt this Period

19.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSSELL, JACQUE, , ,**

Mailing Address 210 HOLMES RD

City  
SCARBOROUGHState  
MEZip Code  
04074-8410FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704871**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAARION, CARL, , ,**

Mailing Address 6213 S GLEN TRAIL

City  
CIRCLE PINESState  
MNZip Code  
55014-5499FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705611**

Amount of Each Receipt this Period

23.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

292.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4137 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANGMALEE, VARINEE, , MRS.,**

Mailing Address 4351 LAKE CHIMNEY CT. NE

City  
ROSWELLState  
GAZip Code  
30075-3138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704686

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANTOS, LENNY, , ,**

Mailing Address 15724 NW 11TH ST

City  
PEMBROKE PINESState  
FLZip Code  
33028-1600FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENCORE VIBESOccupation (for Individual)  
MUSIC PRODUCER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1041.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706340

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCARLETT, KENNETH, , ,**

Mailing Address 17114 PARK LODGE DR.

City  
SPRINGState  
TXZip Code  
77379-4493FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706523

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1112.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4138 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHAFFNIT, WAYNE, , ,**

Mailing Address 340 DUNCAN ST

City  
SAN FRANCISCOState  
CAZip Code  
94131-2022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705586**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHIPPER, HAROLD, S., MR., JR.**

Mailing Address 1450 NORTH RHODE ISLAND AVENUE

City  
MASON CITYState  
IAZip Code  
50401-1446FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706682**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEARS, JAMES, D., MR.,**

Mailing Address PO BOX 15956

City  
LITTLE ROCKState  
ARZip Code  
72231-5956FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706644**

Amount of Each Receipt this Period

94.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

199.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4139 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SELIG, ROBERT, J., ,**

Mailing Address 65 JOLLEY DR APT 331

City  
BLOOMFIELDState  
CTZip Code  
06002-4251FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704739**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHAYS, LORRAINE, , ,**

Mailing Address 14659 CANALVIEW DRIVE APT A

City  
DELRAY BEACHState  
FLZip Code  
33484-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704845**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHEEHAN, MARK, , ,**

Mailing Address 1512 RIDGEWOOD DR

City  
WACOState  
TXZip Code  
76710-1094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705634**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4140 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706072**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706074**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706076**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

43.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4141 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SILVEIRA, CHRIS, , ,**

Mailing Address 3 HILLBILLY LN, LOT A

City  
CRESCENT VALLEYState  
NVZip Code  
89821-8083FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706148

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SINGER, GEORGE, , ,**

Mailing Address 1415 WATERSIDE DR.

City  
DALLASState  
TXZip Code  
75218-4477FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704794

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, GINGER, M., MS.,**

Mailing Address 2348 TRAILWOOD DR

City  
CANTONMENTState  
FLZip Code  
32533-6709FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

381.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706640

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

218.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4142 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, TOM, R., MR.,**

Mailing Address 1125 MARK PLACE, NW

City  
KENNESAWState  
GAZip Code  
30144-6301FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.78

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705185**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, WILLIAM, EVANS, ,**

Mailing Address 2620 S. GRANT STREET

City  
ARLINGTONState  
VAZip Code  
22202-2520FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE GOVERNMENT AFFAIRSOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706372**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLEANICOV, PAVEL, A., MR.,**

Mailing Address 711 MEADOW CREST DRIVE

City  
ROCKTONState  
ILZip Code  
61072-8000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.52

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705880**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

285.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4143 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPECHT, VIVIAN, , ,**

Mailing Address PO BOX 63

City  
LYMANState  
NEZip Code  
69352-0063FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704756

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEES, LAURA, , ,**

Mailing Address 3509 HOUCKS MILL RD.

City  
MONKTONState  
MDZip Code  
21111-1703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705558

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706715

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4144 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706716

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706717

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706718

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4145 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

Transaction ID : SA11A.27706719

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

Transaction ID : SA11A.27706721

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

Transaction ID : SA11A.27706723

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

40.50

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4146 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

Transaction ID : SA11A.27706727

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOCKS, LAURENCE, , ,**

Mailing Address 290 SUSSEX PL.

City  
CARSON CITYState  
NVZip Code  
89703-5360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.30

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

Transaction ID : SA11A.27704632

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOCKS, LAURENCE, , ,**

Mailing Address 290 SUSSEX PL.

City  
CARSON CITYState  
NVZip Code  
89703-5360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

639.30

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

Transaction ID : SA11A.27705041

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4147 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STOKES, PATSY, , ,**

Mailing Address 2092 GREY FOX LANE

City  
VIRGINIA BEACHState  
VAZip Code  
23456-5206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705689

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOKES, PATSY, , ,**

Mailing Address 2092 GREY FOX LANE

City  
VIRGINIA BEACHState  
VAZip Code  
23456-5206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705705

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOUT, GREGORY, , ,**

Mailing Address 1747 TOMMY AARON DR

City  
EL PASOState  
TXZip Code  
79936-4621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

392.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704649

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

104.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4148 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STREBECK, JULIA, , ,**

Mailing Address 5315 CR 922

City  
NEVADAState  
TXZip Code  
75173-6161FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704636

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STUBBLEFIELD, DOTTIE, , ,**

Mailing Address 1265 CHARTRES

City  
KAUFMANState  
TXZip Code  
75142-4473FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705523

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STUBBLEFIELD, DOTTIE, , ,**

Mailing Address 1265 CHARTRES

City  
KAUFMANState  
TXZip Code  
75142-4473FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705530

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

34.91



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4149 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STUBBLEFIELD, DOTTIE, , ,**

Mailing Address 1265 CHARTRES

City  
KAUFMANState  
TXZip Code  
75142-4473FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705536

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STURGILL, LARRY, , ,**

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706192

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706347

Amount of Each Receipt this Period

49.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

97.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4150 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SZALOCZI, IRENE, , ,**

Mailing Address 27 GRACE ST

City  
FORDSState  
NJZip Code  
08863-2101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705491**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TABLER, ANDREW, , ,**

Mailing Address 2003 GLEN DRIVE

City

ALEXANDRIA

State

VA

Zip Code

22307-1138

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KL GATESOccupation (for Individual)  
GOVERNMENT AFFAIRS ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706212**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TETU, EMILE, , ,**

Mailing Address 44 NORRIS STREET

City

MANCHESTER

State

NH

Zip Code

03103-3726

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706304**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2585.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4151 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THOMAS, ALAN, , ,

Mailing Address 3985 MACEACHEN BLVD  
APT 233

City  
SARASOTA

State  
FL

Zip Code  
34233-1100

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706382

Amount of Each Receipt this Period

115.88

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMAS, JEANNE, , ,

Mailing Address 5 HIBISCUS LANE

City  
AYER

State  
MA

Zip Code  
01432-1550

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
MESSAGE THERAPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706325

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMPSON, KAREN, , MRS.,

Mailing Address 27 ARIZONA STATE DR.

City  
NEWARK

State  
DE

Zip Code  
19713-1145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
D&S WAREHOUSING INC

Occupation (for Individual)  
SMALL BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704706

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

201.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4152 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TIPTON, STEVEN, , ,**

Mailing Address 3818 EAST 63RD STREET

City  
TULSAState  
OKZip Code  
74136-1524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.44

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706242**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TITUS, ALDONA, , ,**

Mailing Address 7214 WEST CROSS CREEK TRAIL

City  
BRECKSVILLEState  
OHZip Code  
44141-3143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704915**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TORRES, JOHN, , ,**

Mailing Address 8501 ELIOT AVE

City  
REGO PARKState  
NYZip Code  
11374-2737FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.43

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705437**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

178.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4153 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TROYER, DENNIS, , ,**

Mailing Address 2192 GLEN COVE WAY

City  
HIGH POINTState  
NCZip Code  
27265-9445FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.75

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704784**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TROYER, DENNIS, , ,**

Mailing Address 2192 GLEN COVE WAY

City  
HIGH POINTState  
NCZip Code  
27265-9445FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.75

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704936**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TROYER, DENNIS, , ,**

Mailing Address 2192 GLEN COVE WAY

City  
HIGH POINTState  
NCZip Code  
27265-9445FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

377.75

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704957**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4154 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRUSLER, LAURA, , ,**

Mailing Address 1 HILLVIEW COURT

City  
CORTLANDT MANORState  
NYZip Code  
10567-6411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HENDRICK HUDSON SCHOOL DISTRICTOccupation (for Individual)  
MONITOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704667

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRUSLER, LAURA, , ,**

Mailing Address 1 HILLVIEW COURT

City  
CORTLANDT MANORState  
NYZip Code  
10567-6411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HENDRICK HUDSON SCHOOL DISTRICTOccupation (for Individual)  
MONITOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27704669

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TUMLINSON, RICHARD, , ,**

Mailing Address P.O. BOX 3817

City  
ENGLEWOODState  
COZip Code  
80155-3817FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706577

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4155 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TURNER, WALEAH, , ,**

Mailing Address 501 FOREST RIDGE

City  
BROKEN ARROWState  
OKZip Code  
74014-6963FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705223

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TURNER, WALEAH, , ,**

Mailing Address 501 FOREST RIDGE

City  
BROKEN ARROWState  
OKZip Code  
74014-6963FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705230

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ULZHEIMER, BOB, , ,**

Mailing Address 4011 GUNNIN ROAD

City  
NORCROSSState  
GAZip Code  
30092-1949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705372

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

201.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4156 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UMBARGER, BRENDA, L., ,**

Mailing Address P.O. BOX 1774

City  
FRITCHState  
TXZip Code  
79036-1774FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.56

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705671**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VALLEY, NANCY, , ,**

Mailing Address 3 INDIAN PIPE DRIVE

City

WYNANTSKILL

State

NY

Zip Code

12198-7818

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.30

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705980**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VATTHAUER, VIRGENE, A., MRS.,**

Mailing Address 1321STRATFORD COURT

City

MIDDLETON

State

WI

Zip Code

53562-3675

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.65

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706532**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.47



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4157 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAVKEN, SHERI, , ,**

Mailing Address 39140 GRAY SQUIRREL RD.

City  
TEMECULAState  
CAZip Code  
92592-9071FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704926**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAWTER, STEVE, , ,**

Mailing Address 1701 CATALINA AVE

City  
SEAL BEACHState  
CAZip Code  
90740-5710FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706294**

Amount of Each Receipt this Period

300.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VEKEMAN, DENIS, , ,**

Mailing Address 38 CAPE COD COURT

City  
WASHINGTON TOWNSHIState  
NJZip Code  
08012-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706597**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

370.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4158 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VENNUM, PAULINE, , ,**

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDOState  
FLZip Code  
32801-4360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.43

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705571**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VIADA, MARIA, , ,**

Mailing Address 1271 AVENUE DU CHATEAU

City  
COVINGTONState  
LAZip Code  
70433-6424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.19

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704966**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VIADA, MARIA, , ,**

Mailing Address 1271 AVENUE DU CHATEAU

City  
COVINGTONState  
LAZip Code  
70433-6424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.19

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704967**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

24.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4159 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VIADA, MARIA, , ,**

Mailing Address 1271 AVENUE DU CHATEAU

City  
COVINGTONState  
LAZip Code  
70433-6424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.19

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704971**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VIADA, MARIA, , ,**

Mailing Address 1271 AVENUE DU CHATEAU

City  
COVINGTONState  
LAZip Code  
70433-6424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.19

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704976**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VIADA, MARIA, , ,**

Mailing Address 1271 AVENUE DU CHATEAU

City  
COVINGTONState  
LAZip Code  
70433-6424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.19

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704980**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4160 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VITALI, SONYA, , ,**

Mailing Address 9888 EAST LEGEND COURT

City  
GOLD CANYONState  
AZZip Code  
85118-5891FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705236**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VITALI, SONYA, , ,**

Mailing Address 9888 EAST LEGEND COURT

City  
GOLD CANYONState  
AZZip Code  
85118-5891FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705240**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706524**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4161 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706737

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WAHMAN, GERALD, , ,**

Mailing Address PO BOX 789

City  
ALMAState  
ARZip Code  
72921-0789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706345

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALKER, PATRICIA, V., MS.,**

Mailing Address 1470 RIVERVIEW DR.

City  
LEWISPORTState  
KYZip Code  
42351-2434FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

319.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705409

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4162 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WARREN, GERALDINE, , ,**

Mailing Address 1075 CANTER ROAD NORTHEAST

City  
ATLANTAState  
GAZip Code  
30324-2554FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706503**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATERS, TIM, , ,**

Mailing Address 4318 WINDWILLOW LN

City  
CLERMONTState  
FLZip Code  
34714-6277FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.94

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27705506**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRISTOL MYERS SQUIBBOccupation (for Individual)  
COMPETITIVE INTELLIGENCE STRAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.41

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704743**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.76

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4163 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRISTOL MYERS SQUIBBOccupation (for Individual)  
COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705863

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEATHERLY, CINDI, , ,**

Mailing Address 4690 MEADOW SPRINGS DRIVE

City  
WATKINSVILLEState  
GAZip Code  
30677-4642FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706373

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEHMAN, JOAN, , ,**

Mailing Address 831 HICKORY KNOB CIRCLE

City  
CEDAR HILLState  
TXZip Code  
75104-7803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1670.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705047

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

141.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4164 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEHMAN, JOAN, , ,**

Mailing Address 831 HICKORY KNOB CIRCLE

City  
CEDAR HILLState  
TXZip Code  
75104-7803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1670.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706264

Amount of Each Receipt this Period

70.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WELLS, BUTCH, , ,**

Mailing Address 975 HOLIDAY DR.

City  
MOUNTAIN HOMEState  
IDZip Code  
83647-2322FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705392

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELLS, JOSEPH, , MR., JR.**Mailing Address 151 FAIRVIEW DR.  
APT 358City  
LITITZState  
PAZip Code  
17543-8164FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706306

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4165 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704732**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHEELER, BRUCE, , ,**

Mailing Address 7800 SOUTHWEST PARKWAY

City  
AUSTINState  
TXZip Code  
78735-6113FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706773**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITE, LINDA, , ,**

Mailing Address 4433 MOCKINGBIRD LN

City  
DALLASState  
TXZip Code  
75205-2617FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705133**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

207.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4166 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITE, SHIRLEY, LEE, MS.,**

Mailing Address 807 BRAZOS BEND DR.

City  
CEDAR PARKState  
TXZip Code  
78613-7505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705995

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITE, TIM, , ,**

Mailing Address 1011 RIDGLEA DRIVE

City  
BURNSState  
TNZip Code  
37029-5255FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27706588

Amount of Each Receipt this Period

21.78

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITTINGTON, JAMES, W., MR.,**

Mailing Address 1178 TRUCHARD LANE

City  
LINCOLNState  
CAZip Code  
95648-8144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA11A.27705917

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

162.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4167 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILKINS, BELINDA, , ,**

Mailing Address 1105 RATLIFF ST

City  
OZONAState  
TXZip Code  
76943-4455FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706512**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, BETTY, , ,**

Mailing Address 311 HARPER LOOP

City

GRANTS PASS

State

OR

Zip Code

97527-5339

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27705520**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, AARON, , ,**

Mailing Address 17205 KENTUCKY RD

City

NEOSHO

State

MO

Zip Code

64850-8590

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706448**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4168 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, BRAD, , ,**

Mailing Address 13 HICKORY KNOLL PLACE

City  
HILTON HEAD ISLANDState  
SCZip Code  
29926-2656FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CHARTER ONE REALTYOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.57

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704767**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, CHEQUITA, , ,**

Mailing Address 222BENSON ROAD

City  
GARDENDALEState  
ALZip Code  
35071-3851FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.88

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27706526**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, STEVE, , ,**

Mailing Address 1305 233RD ST SE

City  
BOTHELLState  
WAZip Code  
98021-5804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

428.64

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA11A.27704908**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4169 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINGFIELD, REBECCA, C., MRS.,**

Mailing Address 11800 CYPRESS RD

City  
DIXON

State  
MO

Zip Code  
65459-7212

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.75

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

**Transaction ID : SA11A.27705495**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINTERS, KENNETH, C., MR.,**

Mailing Address 29840 THUNDERPAW DR

City  
HARVEST

State  
AL

Zip Code  
35749-6523

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

**Transaction ID : SA11A.27704707**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINTERS, KENNETH, C., MR.,**

Mailing Address 29840 THUNDERPAW DR

City  
HARVEST

State  
AL

Zip Code  
35749-6523

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

376.00

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025

**Transaction ID : SA11A.27704709**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

65.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4170 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, MARY, H., MR.,**

Mailing Address 300 BELL MEADE DR.

City  
EADSState  
TNZip Code  
38028-3524FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27704822**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WYNIA, WILMA, , ,**

Mailing Address 1065 LOMITA BLVD SPC 429

City  
HARBOR CITYState  
CAZip Code  
90710-5079FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706704**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YENSEL, PATRICIA, , ,**

Mailing Address 4811 RASPBERRY CIRCLE

City  
RAVENNAState  
OHZip Code  
44266-7843FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA11A.27706003**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4171 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11C.27708172

Amount of Each Receipt this Period

93727.06

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708669

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABERCROMBIE, BETTY, , ,**

Mailing Address 1011W BUTLER RD.

City  
GREENVILLEState  
SCZip Code  
29607-4844FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708174

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

285.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4172 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708381

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708388

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** ADAMS, PETER, , DR.,

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709380

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34.80



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4173 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709591**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710075**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AGUILERA, ROBERT, A., MR.,**

Mailing Address 8185 BENEVENTO DR

City  
EL DORADO HILLSState  
CAZip Code  
95762-6217FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

359.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709394**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.77

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4174 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AL SHAHWANI, MOHAMMED, , ,**

Mailing Address 1801 BLUE MARBLE TER SE

City  
LEESBURGState  
VAZip Code  
20175-4760FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709031**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALBERS, GREGG, , ,**

Mailing Address 220 FOX BRIAR LN

City  
MADISON HEIGHTSState  
VAZip Code  
24572-2770FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CVFPOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709491**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALBERS, GREGG, , ,**

Mailing Address 220 FOX BRIAR LN

City  
MADISON HEIGHTSState  
VAZip Code  
24572-2770FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CVFPOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

263.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709506**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

186.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4175 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALBERS, GREGG, , ,**

Mailing Address 220 FOX BRIAR LN

City  
MADISON HEIGHTSState  
VAZip Code  
24572-2770FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CVFPOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.85

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025

Transaction ID : SA11A.27709677

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALBERS, GREGG, , ,**

Mailing Address 220 FOX BRIAR LN

City  
MADISON HEIGHTSState  
VAZip Code  
24572-2770FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CVFPOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.85

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025

Transaction ID : SA11A.27709711

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALFAISAL, FAHD, , ,**

Mailing Address 9424 CHEROKEE

City  
BEVERLY HILLSState  
CAZip Code  
90210-1704FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

688.28

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025

Transaction ID : SA11A.27708261

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4176 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALFAISAL, FAHD, , ,**

Mailing Address 9424 CHEROKEE

City  
BEVERLY HILLSState  
CAZip Code  
90210-1704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

688.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708264**

Amount of Each Receipt this Period

70.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709397**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, NANCY, , ,**

Mailing Address 575 72ND ST SE

City  
MONTROSEState  
MNZip Code  
55363-8003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FOOD SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

353.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708762**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4177 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, NANCY, , ,**

Mailing Address 575 72ND ST SE

City  
MONTROSEState  
MNZip Code  
55363-8003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FOOD SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709311**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ASBJORNSON, NORMAN, H., MR.,**

Mailing Address 2202 S TROOST AVE.

City  
TULSAState  
OKZip Code  
74114-1320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709141**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ASBJORNSON, NORMAN, H., MR.,**

Mailing Address 2202 S TROOST AVE.

City  
TULSAState  
OKZip Code  
74114-1320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709281**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

211.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4178 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AVELINO, MARCIAL, , ,**

Mailing Address 728 CHATSWORTH DRIVE

City  
ACCOKEEKState  
MDZip Code  
20607-2003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708265**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BACHELDOR, NED, , ,**Mailing Address 630 CAROLINA BAY DR  
APT 209City  
WILMINGTONState  
NCZip Code  
28403-2038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709862**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BALL, DAVID, , ,**

Mailing Address P.O. BOX 242

City  
ALEXANDERState  
ARZip Code  
72002-0242FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MID STATES SUPPLYOccupation (for Individual)  
VALVE ACTUATION SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

243.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708723**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4179 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BANGERT, MARILYN, , MRS.,**

Mailing Address 8713 US HWY 85

City  
FORT LUPTONState  
COZip Code  
80621-9309FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.19

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709878**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARFUSS, WENDY, , MS.,**

Mailing Address 120 SUNNY BRANCH RD

City  
FAR HILLSState  
NJZip Code  
07931-2493FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.85

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709337**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARFUSS, WENDY, , MS.,**

Mailing Address 120 SUNNY BRANCH RD

City  
FAR HILLSState  
NJZip Code  
07931-2493FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.85

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709339**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4180 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARFUSS, WENDY, , MS.,**

Mailing Address 120 SUNNY BRANCH RD

City  
FAR HILLSState  
NJZip Code  
07931-2493FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.85

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709344**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARILLARO, MARYANN, , MS.,**Mailing Address 130 WATER ST  
APT 1ACity  
NEW YORKState  
NYZip Code  
10005-1622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.36

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709547**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARTO, THEODORE, , ,**

Mailing Address 1245 DEACON RD

City  
HAINESPORTState  
NJZip Code  
08036-3634FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

283.36

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708398**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.98



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4181 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAWDEN, RICHARD, , ,**

Mailing Address 1377 S. CENTER ST.

City  
REDLANDSState  
CAZip Code  
92373-7004FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708615

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEBOUT, MATT, , ,**

Mailing Address 549 DOWNS CIRCLE

City  
RIVERTONState  
WYZip Code  
82501-2211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NUCOROccupation (for Individual)  
PROJECT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708368

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BELLINO, LAURA, , ,**

Mailing Address 116 CARRIAGE LAMP WAY

City  
PONTE VEDRA BEACHState  
FLZip Code  
32082-1903FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

568.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710061

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

308.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4182 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BENNETT, CRAIG, , MR.,**

Mailing Address 9953 E BALANCING ROCK RD

City  
SCOTTSDALEState  
AZZip Code  
85262-2363FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UTILITY TRAILER MANUFACTURING COOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708661**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BENTLEY, DELORES, , ,**

Mailing Address 4418 ROSSER SQ

City  
DALLASState  
TXZip Code  
75244-6648FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCAOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709475**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEST, SAMMY, L., ,**

Mailing Address 1807 FM 3240

City  
BANDERAState  
TXZip Code  
78003-5233FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1027.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710353**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4183 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.38

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708540**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.38

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708543**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.38

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708566**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4184 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708571

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BINIENDA, MARY, E., MS.,**Mailing Address 28413 ABBEY LN  
APT 172City  
NEW HUDSONState  
MIZip Code  
48165-2804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710240

Amount of Each Receipt this Period

20.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNEState  
ALZip Code  
35967-5145FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

343.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708567

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

108.22

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4185 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNEState  
ALZip Code  
35967-5145FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.05

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709207**

Amount of Each Receipt this Period

87.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOU, SOKHOEUN, , ,**

Mailing Address 12 WOODBRIDGE MANOR ROAD

City  
ANSONIAState  
CTZip Code  
06401-2626FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MEDTRONICOccupation (for Individual)  
TECH III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.50

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709283**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMASState  
ORZip Code  
97015-8629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.55

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709015**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4186 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMASState  
ORZip Code  
97015-8629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025

Transaction ID : SA11A.27709429

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, BONNIE, J., ,**

Mailing Address 8656 SUNNYSLOPE DR.

City  
SAN GABRIELState  
CAZip Code  
91775-1129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.63

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025

Transaction ID : SA11A.27709110

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYD, BONNIE, J., ,**

Mailing Address 8656 SUNNYSLOPE DR.

City  
SAN GABRIELState  
CAZip Code  
91775-1129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.63

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025

Transaction ID : SA11A.27709729

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

84.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 4187 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYDA, KENNETH, , ,**

Mailing Address 1200 BARTON CREEK BLVD, #58

City  
AUSTINState  
TXZip Code  
78735-1633FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708813

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRACKEN, KAY, , ,**

Mailing Address 405 HAMVASY

City  
TYLERState  
TXZip Code  
75701-5324FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRACKEN INTERESTOccupation (for Individual)  
OIL AND GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2334.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708519

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRANDNER, PATRICK, , ,**

Mailing Address 4 MENAGGIO CT

City  
HENDERSONState  
NVZip Code  
89011-2815FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

314.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709701

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4188 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRANIGAN, JONI, , ,**

Mailing Address 915 EAST CARY

City  
PAPILLIONState  
NEZip Code  
68046-6126FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708224

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BREMER, CAROL, L., MS.,**

Mailing Address 12183 DUNLAP PL

City  
CHINOState  
CAZip Code  
91710-2331FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709582

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BREMER, CAROL, L., MS.,**

Mailing Address 12183 DUNLAP PL

City  
CHINOState  
CAZip Code  
91710-2331FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

292.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709584

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.54



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4189 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BREMER, CAROL, L., MS.,**

Mailing Address 12183 DUNLAP PL

City  
CHINOState  
CAZip Code  
91710-2331FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709589

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROADHEAD, ANN, B., ,**

Mailing Address PO BOX 2348

City  
KILL DEVIL HILLSState  
NCZip Code  
27948-2348FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708750

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROADHEAD, ANN, B., ,**

Mailing Address PO BOX 2348

City  
KILL DEVIL HILLSState  
NCZip Code  
27948-2348FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708757

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4190 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROCK, KENNETH, , ,**

Mailing Address 408 N 9TH STREET

City  
NEW BADENState  
ILZip Code  
62265-1137FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709092**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROCK, KENNETH, , ,**

Mailing Address 408 N 9TH STREET

City  
NEW BADENState  
ILZip Code  
62265-1137FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709096**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708820**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4191 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, DENNIS, , ,**

Mailing Address 3022 REDWOOD AVENUE

City  
LAKELANDState  
FLZip Code  
33803-4345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

642.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708439**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, KATHLEEN, , ,**

Mailing Address 12707 WEST CAMBRIDGE AVE

City  
AVONDALEState  
AZZip Code  
85392-7068FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710031**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, SHARMAN, , MS.,**

Mailing Address 110 CLIFF ST

City  
CORDOVAState  
ALZip Code  
35550-1216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2819.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709947**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4192 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRUMBAUGH, PHILIP, C., MR.,**

Mailing Address 108 PHILIP DR

City  
WEST MILTONState  
OHZip Code  
45383-1330FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708231

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURKERT, LINDA, , ,**

Mailing Address 1541 SUMMER WAY

City  
IDAHO FALLSState  
IDZip Code  
83404-8258FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708965

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURKERT, LINDA, , ,**

Mailing Address 1541 SUMMER WAY

City  
IDAHO FALLSState  
IDZip Code  
83404-8258FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708968

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4193 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURKERT, LINDA, , ,**

Mailing Address 1541 SUMMER WAY

City  
IDAHO FALLSState  
IDZip Code  
83404-8258FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708975**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURKERT, LINDA, , ,**

Mailing Address 1541 SUMMER WAY

City  
IDAHO FALLSState  
IDZip Code  
83404-8258FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708978**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURR, LAWRENCE, , MR.,**

Mailing Address 31065 CASTLE RIDGE DRIVE

City  
BROOKSVILLEState  
FLZip Code  
34602-7529FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708887**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4194 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURR, LAWRENCE, , MR.,**

Mailing Address 31065 CASTLE RIDGE DRIVE

City  
BROOKSVILLEState  
FLZip Code  
34602-7529FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.90

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709183**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUSS, DIETRICH, G., MR.,**

Mailing Address 1518 CAMINO DEL SOL

City  
FULLERTONState  
CAZip Code  
92833-1915FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.32

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709929**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CARA, , ,**

Mailing Address 804 ROSEBERRY RD

City  
CARLISLEState  
KYZip Code  
40311-9653FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709949**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4195 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708207

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708252

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709570

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

128.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4196 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, FRANCIS, C., MR.,**

Mailing Address 5432 S SALVATION PL.

City  
SIOUX FALLSState  
SDZip Code  
57108-8543FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.96

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709052**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARR, RICHARD, , ,**

Mailing Address 8608 CROSSWIND DR.

City  
FORT WORTHState  
TXZip Code  
76179-3011FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DCSGINC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709467**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARREL, RONALD, , ,**

Mailing Address 10456 E 201ST ST S

City  
BIXBYState  
OKZip Code  
74008-6747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.29

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709357**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

287.48



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4197 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAST, BONNIE, , ,**

Mailing Address 308 PINE MOSS DR.

City  
FORT WALTON BEACHState  
FLZip Code  
32548-6308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709379**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHAMBERLIN, CLINT, , ,**

Mailing Address 1519 5TH AVENUE WEST

City  
WILLISTONState  
NDZip Code  
58801-3903FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710399**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANA, MAGHAR, S., MR.,**

Mailing Address 315 MERCEDES LANE

City  
COLBURNState  
INZip Code  
47905-4566FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.51

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709643**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

41.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4198 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHAPPEL, GREGORY, , MR.,**

Mailing Address 2216 PADRE BLVD

City  
SOUTH PADRE ISLANDState  
TXZip Code  
78597-0204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JAMISON & CHAPPELOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.31

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709513**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHESTNEY, CYNTHIA, , ,**

Mailing Address 4120 LYNDAL ROAD

City  
ALTOONAState  
PAZip Code  
16602-1537FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708862**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CIERLAK, CYNTHIA, , ,**

Mailing Address 794 FLORENCIA CIRCLE

City  
TITUSVILLEState  
FLZip Code  
32780-4965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.12

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710267**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4199 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CIERLAK, CYNTHIA, , ,**

Mailing Address 794 FLORENCIA CIRCLE

City  
TITUSVILLEState  
FLZip Code  
32780-4965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.12

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710268**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CIERLAK, CYNTHIA, , ,**

Mailing Address 794 FLORENCIA CIRCLE

City  
TITUSVILLEState  
FLZip Code  
32780-4965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.12

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710270**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CIERLAK, CYNTHIA, , ,**

Mailing Address 794 FLORENCIA CIRCLE

City  
TITUSVILLEState  
FLZip Code  
32780-4965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.12

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710271**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4200 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CIERLAK, CYNTHIA, , ,**

Mailing Address 794 FLORENCIA CIRCLE

City  
TITUSVILLEState  
FLZip Code  
32780-4965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.12

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710272**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CIERLAK, CYNTHIA, , ,**

Mailing Address 794 FLORENCIA CIRCLE

City  
TITUSVILLEState  
FLZip Code  
32780-4965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.12

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710273**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLAGGETT, RONALD, , ,**

Mailing Address 6440 SKY POINTE DR. 140-138

City  
LAS VEGASState  
NVZip Code  
89131-4047FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.72

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709518**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

81.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4201 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLARK, STEPHEN, B., MR.,**

Mailing Address 4202 SKYLINE DR

City  
FARMINGTONState  
NMZip Code  
87401-9224FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709051**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLAY, GLORY ANN, , ,**

Mailing Address 208 HALFHILL LANE

City  
NICHOLASVILLEState  
KYZip Code  
40356-6622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709004**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLOUGH, CHARLES, A., MR.,**

Mailing Address 303 HEMINGWAY DRIVE

City  
BEL AIRState  
MDZip Code  
21014-3216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708539**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4202 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLON, EDWIN, , ,

Mailing Address 624 148TH COURT, NE  
110City  
BRADENTONState  
FLZip Code  
34212-5596FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708364

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLON, EDWIN, , ,

Mailing Address 624 148TH COURT, NE  
110City  
BRADENTONState  
FLZip Code  
34212-5596FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708365

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLON, EDWIN, , ,

Mailing Address 624 148TH COURT, NE  
110City  
BRADENTONState  
FLZip Code  
34212-5596FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708366

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

87.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4203 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLON, EDWIN, , ,

Mailing Address 624 148TH COURT, NE  
110City  
BRADENTONState  
FLZip Code  
34212-5596FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708375

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLON, EDWIN, , ,

Mailing Address 624 148TH COURT, NE  
110City  
BRADENTONState  
FLZip Code  
34212-5596FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708376

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLON, EDWIN, , ,

Mailing Address 624 148TH COURT, NE  
110City  
BRADENTONState  
FLZip Code  
34212-5596FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708377

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4204 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLON, EDWIN, , ,**Mailing Address 624 148TH COURT, NE  
110City  
BRADENTONState  
FLZip Code  
34212-5596FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708378**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLON, EDWIN, , ,**Mailing Address 624 148TH COURT, NE  
110City  
BRADENTONState  
FLZip Code  
34212-5596FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708380**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLYER, KEVIN, , ,**

Mailing Address PSC 470 BOX 2908

City  
FPOState  
APZip Code  
96534-0030FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
US DODOccupation (for Individual)  
OPERATIONS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710406**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.47



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4205 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONSTANTINE, RUSSELL, , ,**

Mailing Address 209 ROBIN HOOD DR

City  
COVINGTONState  
LAZip Code  
70433-4762FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708852**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CORMIER, WILLIAM, , MR.,**

Mailing Address 1025 MAIN ST

City  
LEOMINSTERState  
MAZip Code  
01453-1909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709053**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORNILLAUD, JOSEPHINE, , ,**

Mailing Address 2821 IRWIN DR.

City  
SOUTHPORTState  
NCZip Code  
28461-8469FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

347.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709945**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4206 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COUNTRYMAN, BYRON, E., MR.,**

Mailing Address 5933 W. CENTURY BLVD.,

City  
LOS ANGELESState  
CAZip Code  
90045-5472FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COUNTRYMAN AND DANIELOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.18

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708944**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COX, JUNE, , ,**

Mailing Address 159 NTH 4TH AVE

City  
FORSYTHState  
MTZip Code  
59327-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.74

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708576**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIS, JUDY, L., MRS.,**

Mailing Address 405 KEYS LANE

City  
HEPHZIBAHState  
GAZip Code  
30815-5411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

476.16

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708732**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4207 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRUZ, LUCINDA, , ,**

Mailing Address 2647 ROLLING CREEK ROAD

City  
SPRING BRANCHState  
TXZip Code  
78070-5764FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PRIDE PHC SERVICES INCOccupation (for Individual)  
ADMINISTRATOR/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708441**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRUZ, LUCINDA, , ,**

Mailing Address 2647 ROLLING CREEK ROAD

City  
SPRING BRANCHState  
TXZip Code  
78070-5764FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PRIDE PHC SERVICES INCOccupation (for Individual)  
ADMINISTRATOR/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708445**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CUKJATI, JOSEPH, F., MR.,**Mailing Address P.O. BOX 677  
STE 115City  
VENUSState  
TXZip Code  
76084-0677FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

985.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709817**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4208 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURRY, ROBERT, J., ,**

Mailing Address 1205 ANDTE CIR.

City  
CLAREMOREState  
OKZip Code  
74017-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.13

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709629**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURTIS, KEVIN, , MR.,**

Mailing Address 3540 KELLOGG WAY

City  
SAN DIEGOState  
CAZip Code  
92106-3346FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CURTISOccupation (for Individual)  
MFGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.72

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709026**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURTIS, KEVIN, , MR.,**

Mailing Address 3540 KELLOGG WAY

City  
SAN DIEGOState  
CAZip Code  
92106-3346FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CURTISOccupation (for Individual)  
MFGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.72

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709383**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

84.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4209 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURTIS, KEVIN, , MR.,**

Mailing Address 3540 KELLOGG WAY

City  
SAN DIEGOState  
CAZip Code  
92106-3346FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CURTISOccupation (for Individual)  
MFGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710322**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAHIN, JOHN, , ,**

Mailing Address 224 RIDGEWOOD ST

City  
ALTAMONTE SPRINGSState  
FLZip Code  
32701-7613FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709689**

Amount of Each Receipt this Period

24.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAHLBERG, NANCY, , MRS.,**

Mailing Address 208 PONDEROSA PINE DR

City  
BLUE EYEState  
MOZip Code  
65611-8244FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INTERIOR DESIGNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

501.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709274**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4210 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708787**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DARR, LUCY, , ,**

Mailing Address 1017 GADWALL CIR

City  
HENDERSONVILLEState  
TNZip Code  
37075-6321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.29

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709985**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.68

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709370**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4211 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAVIS, EDWIN, A., MR.,**

Mailing Address 10905 EVERGREEN TER. SW

City  
LAKEWOODState  
WAZip Code  
98498-6703FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.10

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708747**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAY, SHARON, , ,**

Mailing Address 85 CARTER DR.

City  
NORTH MONMOUTHState  
MEZip Code  
04265-6019FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.84

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709130**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAY, SHARON, , ,**

Mailing Address 85 CARTER DR.

City  
NORTH MONMOUTHState  
MEZip Code  
04265-6019FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

237.84

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709151**

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4212 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708914

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708915

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708921

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4213 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709329**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEGROOT, PAUL, , ,**

Mailing Address 1S500 FAIRVIEW AVE

City  
LOMBARDState  
ILZip Code  
60148-5017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1548.85

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708829**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEGROOT, PAUL, , ,**

Mailing Address 1S500 FAIRVIEW AVE

City  
LOMBARDState  
ILZip Code  
60148-5017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1548.85

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708833**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4214 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DERING, MARIE, , ,**

Mailing Address 4333 N. OCEAN BLVD

City  
DELRAY BEACHState  
FLZip Code  
33483-7559FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710265**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIAS PINTO, CHERYL, , ,**

Mailing Address 4831 S KILPATRICK AVENUE

City  
CHICAGOState  
ILZip Code  
60632-4828FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.69

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708226**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIEZ, ROBERT, A., MR.,**

Mailing Address 1111 TINSMAN RD

City  
FENTONState  
MIZip Code  
48430-1679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUPREME GEAROccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708495**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

154.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4215 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DITTMAR, CECI, , ,**

Mailing Address 102 OLD COURSE LANE

City  
MC CORMICKState  
SCZip Code  
29835-3216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709424

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOANE, JIM, P., MR.,**

Mailing Address 3460 MINGLEWOOD DR.

City  
BEAUMONTState  
TXZip Code  
77703-2736FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709602

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DONNER, DENNIS, , MR.,**

Mailing Address 1951 E MARSHALL AVE

City  
PHOENIXState  
AZZip Code  
85016-3017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710152

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

223.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4216 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOVER, BRENDA, , ,**

Mailing Address 28656 DEER RUN ST

City  
MONTGOMERYState  
TXZip Code  
77356-3990FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOVER INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

747.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710066**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRIGGERS, PATRICIA, , ,**

Mailing Address 126 PECAN ROW LANE

City  
ALEXANDRIAState  
LAZip Code  
71303-8711FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710329**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUBOSE, ALEX, , MR.,**

Mailing Address 8394 DURNEL DR.

City  
DURHAMState  
CAZip Code  
95938-9735FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708737**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

335.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4217 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNCAN, MARGARET, G., MS.,**

Mailing Address 3 FUDORA CIR

City  
SIMPSONVILLEState  
SCZip Code  
29681-5674FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.92

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709243**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNNAHOO, WILLIAM, , ,**

Mailing Address 20 WINGED FOOT CIR W

City  
ABILENEState  
TXZip Code  
79606-5026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STAR DODGE HYUNDAIOccupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709520**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUTCHER, MICHAEL, A., MR.,**

Mailing Address 6628 TANGLEWOOD RD

City  
SAN DIEGOState  
CAZip Code  
92111-4146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

383.31

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708300**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

296.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4218 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUTCHER, MICHAEL, A., MR.,**

Mailing Address 6628 TANGLEWOOD RD

City  
SAN DIEGOState  
CAZip Code  
92111-4146FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708393**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708336**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EASTMAN, STEVEN, , ,**

Mailing Address 6848 N GOVERNMENT WAY 114

City  
DALTON GARDENSState  
IDZip Code  
83815-7799FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708901**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4219 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EASTMAN, STEVEN, , ,**

Mailing Address 6848 N GOVERNMENT WAY 114

City  
DALTON GARDENSState  
IDZip Code  
83815-7799FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708970**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-6174FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708555**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSONState  
MDZip Code  
21204-4701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708913**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4220 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELLESTAD, BOYD, ALLEN, MR.,**

Mailing Address 30508 SANTA LUNA DR.

City  
RANCHO PALOS VERDEState  
CAZip Code  
90275-6318FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709335**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELLINGSON, MICHAEL, , ,**

Mailing Address P.O. BOX 2473

City  
BURLESONState  
TXZip Code  
76097-2473FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710145**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ESTEFANO, JOSE, , ,**

Mailing Address 1900 N. BAYSHORE DR.

City  
MIAMIState  
FLZip Code  
33132-3001FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RESOURCES R USOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709543**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

103.93



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4221 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EVAVOLD, CRAIG, , ,**

Mailing Address 10424 COUNTY ROAD 14 NE

City  
MILTONAState  
MNZip Code  
56354-8203FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NORTHRIDGE EXPRESSOccupation (for Individual)  
TRUCKING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.64

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708967**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FALLON, JOHN, , ,**Mailing Address 2702 DOUGLAS AVE  
#125City  
DALLASState  
TXZip Code  
75219-3456FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.10

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709777**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FALLON, JOHN, , ,**Mailing Address 2702 DOUGLAS AVE  
#125City  
DALLASState  
TXZip Code  
75219-3456FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.10

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709783**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4222 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FALLON, JOHN, , ,**Mailing Address 2702 DOUGLAS AVE  
#125City  
DALLASState  
TXZip Code  
75219-3456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710355

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FALLON, JOHN, , ,**Mailing Address 2702 DOUGLAS AVE  
#125City  
DALLASState  
TXZip Code  
75219-3456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710356

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FANIZZI, ANN, , ,**

Mailing Address 2505 MORGAN DRIVE

City  
CARMELState  
NYZip Code  
10512-2612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

390.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710036

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4223 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FENNELL, ROBERT, J., MR.,**

Mailing Address 1701 W BRISTOL HOLLOW RD

City  
DUNLAPState  
ILZip Code  
61525-9156FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708739**

Amount of Each Receipt this Period

130.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISHER, JEFF, , ,**

Mailing Address 2750 47TH STREET COURT

City  
ROCK ISLANDState  
ILZip Code  
61201-5873FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709898**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709285**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

236.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4224 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709286

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709287

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709289

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4225 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709290**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709297**

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709299**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4226 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709300

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709304

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLANAGAN, BARBARA, , ,**

Mailing Address N2592 SUMMERVILLE PARK ROAD

City  
LODIState  
WIZip Code  
53555-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

655.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709310

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

68.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4227 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLICKENSCHILD, CONRAD, W., MR.,**

Mailing Address 6 LINDEN DRIVE

City  
WALDENState  
NYZip Code  
12586-1308FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

534.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708461**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708709**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANZMEIER, ALVIN, H., DR.,**Mailing Address 1300 S BORDER  
APT 731City  
WESLACOState  
TXZip Code  
78596-7441FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.53

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709302**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

153.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4228 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FREDERICK, STACEY, , ,**

Mailing Address 111 CELLAR CT

City  
LAFAYETTEState  
LAZip Code  
70508-6770FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
R.N.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708524

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRITZ, JOHN, , MR.,**

Mailing Address P.O. BOX 3115

City  
BIG BEAR LAKEState  
CAZip Code  
92315-3115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710337

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRONCZAK, BRENDA, , ,**

Mailing Address 121 GASCOIGNE BLUFF RD.

City  
BLUFFTONState  
SCZip Code  
29910-6800FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

511.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710403

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

206.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4229 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FULKS, MICHAEL, , ,**

Mailing Address 15025 STRATUS LOOP APT. 204

City  
WINTER GARDENState  
FLZip Code  
34787-7909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DISNEYOccupation (for Individual)  
ATTRACTIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710166**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FUNCHEON, JIM, , ,**

Mailing Address 508 CENTER ST

City  
HACKETTSTOWNState  
NJZip Code  
07840-1104FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708648**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FUNCHEON, JIM, , ,**

Mailing Address 508 CENTER ST

City  
HACKETTSTOWNState  
NJZip Code  
07840-1104FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708650**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4230 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FUNCHEON, JIM, , ,**

Mailing Address 508 CENTER ST

City  
HACKETTSTOWNState  
NJZip Code  
07840-1104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.33

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708653

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FUNCHEON, JIM, , ,**

Mailing Address 508 CENTER ST

City  
HACKETTSTOWNState  
NJZip Code  
07840-1104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.33

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708655

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FUNCHEON, JIM, , ,**

Mailing Address 508 CENTER ST

City  
HACKETTSTOWNState  
NJZip Code  
07840-1104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.33

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708657

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4231 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FUNCHEON, JIM, , ,**

Mailing Address 508 CENTER ST

City  
HACKETTSTOWNState  
NJZip Code  
07840-1104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.33

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708672

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FUNCHEON, JIM, , ,**

Mailing Address 508 CENTER ST

City  
HACKETTSTOWNState  
NJZip Code  
07840-1104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.33

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708675

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FUNCHEON, JIM, , ,**

Mailing Address 508 CENTER ST

City  
HACKETTSTOWNState  
NJZip Code  
07840-1104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.33

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708680

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

26.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4232 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FUNCHEON, JIM, , ,**

Mailing Address 508 CENTER ST

City  
HACKETTSTOWNState  
NJZip Code  
07840-1104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.33

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708685

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FUNCHEON, JIM, , ,**

Mailing Address 508 CENTER ST

City  
HACKETTSTOWNState  
NJZip Code  
07840-1104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.33

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708688

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FUNCHEON, JIM, , ,**

Mailing Address 508 CENTER ST

City  
HACKETTSTOWNState  
NJZip Code  
07840-1104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.33

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708690

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4233 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GASHENKO, LUDA, V., MS.,**

Mailing Address 5401 OLD SEWARD HIGHWAY

City  
ANCHORAGEState  
AKZip Code  
99518-1458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708881**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GASHENKO, LUDA, V., MS.,**

Mailing Address 5401 OLD SEWARD HIGHWAY

City  
ANCHORAGEState  
AKZip Code  
99518-1458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708883**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GASHENKO, LUDA, V., MS.,**

Mailing Address 5401 OLD SEWARD HIGHWAY

City  
ANCHORAGEState  
AKZip Code  
99518-1458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708886**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4234 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GASHENKO, LUDA, V., MS.,**

Mailing Address 5401 OLD SEWARD HIGHWAY

City  
ANCHORAGEState  
AKZip Code  
99518-1458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708889**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAVINO, HENRY, , , III**

Mailing Address 386 DRIFTWOOD TERRACE

City  
BOCA RATONState  
FLZip Code  
33431-8259FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708273**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710137**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4235 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710138

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710140

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710141

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

9.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4236 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710143

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710147

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GHEBREMEDHIN, BERHANE, , ,**

Mailing Address 1520 DOVE CY

City  
PASADENAState  
CAZip Code  
91107-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DPSS LA COUNTYOccupation (for Individual)  
ELIGIBILITY SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1270.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710354

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

82.14



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4237 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILLIS, NORA, , ,**

Mailing Address 6542 DOUGLAS HIGHWAY

City  
MILLWOODState  
GAZip Code  
31552-9786FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708527

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILMORE, KEN, , ,**

Mailing Address 807 HAMPSHIRE RD

City  
DREXEL HILLState  
PAZip Code  
19026-1615FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710245

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709565

Amount of Each Receipt this Period

18.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

168.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4238 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709188

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708779

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709798

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.17

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4239 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORE, TRINA, , ,**

Mailing Address 14321 SOUTHWEST 20TH STREET

City  
DAVIEState  
FLZip Code  
33325-5426FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708738

Amount of Each Receipt this Period

17.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORE, TRINA, , ,**

Mailing Address 14321 SOUTHWEST 20TH STREET

City  
DAVIEState  
FLZip Code  
33325-5426FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709168

Amount of Each Receipt this Period

22.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORE, TRINA, , ,**

Mailing Address 14321 SOUTHWEST 20TH STREET

City  
DAVIEState  
FLZip Code  
33325-5426FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1001.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709247

Amount of Each Receipt this Period

23.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

64.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4240 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRANDSINGER, PEGGY, , ,**

Mailing Address 5501 WEST HILDEBRAND BLVD #208

City  
KENNEWICKState  
WAZip Code  
99338-1975FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709366**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRATTIDGE, JANICE, , ,**

Mailing Address 3427 SW BRIARWOOD LANE

City  
TOPEKAState  
KSZip Code  
66611-1832FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.01

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710043**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRATTIDGE, JANICE, , ,**

Mailing Address 3427 SW BRIARWOOD LANE

City  
TOPEKAState  
KSZip Code  
66611-1832FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.01

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710045**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

69.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4241 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRATTIDGE, JANICE, , ,**

Mailing Address 3427 SW BRIARWOOD LANE

City  
TOPEKAState  
KSZip Code  
66611-1832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710048

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRATTIDGE, JANICE, , ,**

Mailing Address 3427 SW BRIARWOOD LANE

City  
TOPEKAState  
KSZip Code  
66611-1832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710053

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708656

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

46.98

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4242 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, BEN, W., ,**Mailing Address **P O BOX 59**City  
**BIG TIMBER**State  
**MT**Zip Code  
**59011-0059**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**245.46**

Date of Receipt

**02 / 21 / 2025****Transaction ID : SA11A.27709075**

Amount of Each Receipt this Period

**78.08**☐ Memo Item**CONTRIBUTION****EARMARKED FROM WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, JOHN, MARKHAM, MR.,**Mailing Address **98 SAN JACINTO BLVD**  
**APT 2501**City  
**AUSTIN**State  
**TX**Zip Code  
**78701-4082**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**704.10**

Date of Receipt

**02 / 21 / 2025****Transaction ID : SA11A.27708454**

Amount of Each Receipt this Period

**260.25**☐ Memo Item**CONTRIBUTION****EARMARKED FROM WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, LINDA, , ,**Mailing Address **15657 FM 244**City  
**IOLA**State  
**TX**Zip Code  
**77861-3867**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**440.70**

Date of Receipt

**02 / 21 / 2025****Transaction ID : SA11A.27709428**

Amount of Each Receipt this Period

**4.95**☐ Memo Item**CONTRIBUTION****EARMARKED FROM WINRED****SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►**343.28**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4243 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIFFITH, SCOTT, , MR.,**

Mailing Address 9 FAWN RIDGE CT

City  
REISTERSTOWNState  
MDZip Code  
21136-5654FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709670

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708597

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708214

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4244 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708215**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708216**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708218**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3.99



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4245 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROUND, JIM, , ,**

Mailing Address 9791 E DREYFUS AVE

City  
SCOTTSDALEState  
AZZip Code  
85260-4450FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709361

Amount of Each Receipt this Period

38.01

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUENTHER, HART, , ,**

Mailing Address 34 CHOWNING DR.

City  
HAMPTONState  
VAZip Code  
23664-1737FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709740

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUESS, DIANE, M., MRS.,**

Mailing Address 184 SAWYER LN

City  
JASPERState  
GAZip Code  
30143-7045FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

211.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709593

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4246 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUIDA, LISA, , ,**

Mailing Address 1175 PARK AVE

City  
NEW YORKState  
NYZip Code  
10128-1211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710405

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERYState  
ALZip Code  
36117-7558FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708396

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERYState  
ALZip Code  
36117-7558FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

854.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708397

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4247 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERYState  
ALZip Code  
36117-7558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708399**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERYState  
ALZip Code  
36117-7558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708401**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERYState  
ALZip Code  
36117-7558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

854.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708404**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4248 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HALL, OLLABELLE, , MRS.,**

Mailing Address 3603 MEADOW LAKE LANE

City  
HOUSTONState  
TXZip Code  
77027-4110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709338

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HALL, OLLABELLE, , MRS.,**

Mailing Address 3603 MEADOW LAKE LANE

City  
HOUSTONState  
TXZip Code  
77027-4110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709349

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HALLQUIST, JOHN, , ,**

Mailing Address 86 SINGLETON BEACH RD

City  
HILTON HEAD ISLANDState  
SCZip Code  
29928-5326FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709415

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

249.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4249 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMLIN, DENNIS, , ,**

Mailing Address 18735 CORSINI DRIVE

City  
SAN ANTONIOState  
TXZip Code  
78258-1629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708863**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMM, RUTH, , ,**

Mailing Address 275 MAYO DRIVE

City  
BULLARDState  
TXZip Code  
75757-9595FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708506**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMM, RUTH, , ,**

Mailing Address 275 MAYO DRIVE

City  
BULLARDState  
TXZip Code  
75757-9595FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708530**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4250 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANNA, SYLVIA, , ,**

Mailing Address 6109 N GALENA RD

City  
PEORIAState  
ILZip Code  
61614-3605FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710167

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARDER, BRUCE, RICHARD, ,**

Mailing Address 1047 PORTUGAL DR

City  
STAFFORDState  
VAZip Code  
22554-2025FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708903

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARDY, RICHARD, B., MR.,**

Mailing Address 88 MASONIC HOME RD APT R313

City  
CHARLTONState  
MAZip Code  
01507-3304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

678.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709581

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4251 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARTWELL, MAUREEN, , ,**

Mailing Address 235 SW SQUIRREL CT

City  
FORT WHITEState  
FLZip Code  
32038-6080FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708573**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARTWELL, MAUREEN, , ,**

Mailing Address 235 SW SQUIRREL CT

City  
FORT WHITEState  
FLZip Code  
32038-6080FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710017**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710105**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4252 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710111**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEFFERS, REGINA, , ,**

Mailing Address 120 14TH AVE

City  
SEA CLIFFState  
NYZip Code  
11579-1221FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1876.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708279**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEFFLEBOWER, BARBARA, ANN, MS.,**

Mailing Address 4415 NEGAL CIR

City  
MELBOURNEState  
FLZip Code  
32901-8503FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

615.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708322**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.75



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4253 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEMBREE, WILLIAM, L., MR.,**

Mailing Address 2626 BLUE MOUNTAIN TRL

City  
LYONSState  
COZip Code  
80540-8461FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.00

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710104**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENDERSON, MARGARET, , ,**

Mailing Address 10333 ARVIN HILL RD

City  
AUBREYState  
TXZip Code  
76227-6848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.47

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709078**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENDERSON, MARGARET, , ,**

Mailing Address 10333 ARVIN HILL RD

City  
AUBREYState  
TXZip Code  
76227-6848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

337.47

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709091**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4254 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERRELL, TOMMIE, C., MR.,**

Mailing Address P.O. BOX 4338

City  
ALAMOGORDOState  
NMZip Code  
88311-4338FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708898**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HIGGINBOTHAM, LINDA, L., MRS.,**

Mailing Address 810 HANCOCK AVENUE

City  
NATCHITOCHESState  
LAZip Code  
71457-5518FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NATCHITOCHES PARISH SCHOOLSOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709266**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIGGINBOTHAM, LINDA, L., MRS.,**

Mailing Address 810 HANCOCK AVENUE

City  
NATCHITOCHESState  
LAZip Code  
71457-5518FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NATCHITOCHES PARISH SCHOOLSOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709625**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4255 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIGGINS, NEILA, , ,**

Mailing Address 3916 N POTSDAM AVE #3760

City  
SIOUX FALLSState  
SDZip Code  
57104-7048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708985**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, RICHARD, , ,**

Mailing Address 8085 SMOKING JACKET PL

City  
LAS VEGASState  
NVZip Code  
89166-3792FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.52

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708769**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708416**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4256 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709715

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HINKLE, JAMES, L., MR.,**Mailing Address 8100 CLYO RD  
# 218City  
DAYTONState  
OHZip Code  
45458-2720FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710234

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HODGE, CHUCK, , ,**

Mailing Address 10 SYLDOR LANE

City  
NOVATOState  
CAZip Code  
94947-3800FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709749

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

186.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4257 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOFFMAN, CAROLYN, , ,**

Mailing Address 7619 MARYLAND AVE

City  
SAINT LOUISState  
MOZip Code  
63105-3803FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

906.48

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708486**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLMES, ELIZABETH, , ,**

Mailing Address 651 MARSTEN GREEN COURT

City  
AMBLERState  
PAZip Code  
19002-1819FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709408**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOPKINS, GEORGE, , ,**

Mailing Address 135 CR 2984

City  
HUGHES SPRINGSState  
TXZip Code  
75656-6715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.85

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708518**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4258 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HORVATH, LINDA, , ,**

Mailing Address P.O. BOX 34688

City  
INDIANAPOLISState  
INZip Code  
46234-0688FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

745.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709819**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBER, SCOTT, E., MR.,**

Mailing Address 82 FOXFIRE LN

City  
LEWISBERRYState  
PAZip Code  
17339-9337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TSELVES RESEARCHOccupation (for Individual)  
ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708522**

Amount of Each Receipt this Period

120.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUGHES, PAUL, F., MR.,**

Mailing Address 7108 S ANDES CIR

City  
CENTENNIALState  
COZip Code  
80016-2110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RAYTHEONOccupation (for Individual)  
SCIENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710168**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

196.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4259 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708796**

Amount of Each Receipt this Period

0.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAUDES, MARY, K., MRS.,**

Mailing Address 12657 BRADFORD WOODS DR.

City  
SAINT LOUISState  
MOZip Code  
63127-1360FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709044**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JENNINGS, PAULA, , ,**

Mailing Address 122 QUAIL RUN DR.

City  
WARNER ROBINSState  
GAZip Code  
31088-6504FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

656.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709277**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4260 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JENSEN, V., GAIL, ,**

Mailing Address 405 ANGLERSDRIVE, UNIT 1-185

City  
STEAMBOAT SPRINGSState  
COZip Code  
80487-9352FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710131**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JIANG, JOHN, , ,**

Mailing Address 205 TAOS AVE NE

City  
ADAState  
MIZip Code  
49301-8533FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EXPERTON CORPORATIONOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1041.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709942**

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, ANN, W., MRS.,**

Mailing Address 444 POLIHALE WAY

City  
NAPLESState  
FLZip Code  
34114-8351FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709638**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

630.16



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4261 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, PAUL, , ,**

Mailing Address 818 CREEKWOOD DR.

City  
ORMOND BEACHState  
FLZip Code  
32174-1445FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708984**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGSState  
IDZip Code  
83276-1671FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710351**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, JANET, , ,**

Mailing Address 2401 STANFORD ROAD

City  
PANAMA CITYState  
FLZip Code  
32405-3589FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AYA HEALTHCAREOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710183**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4262 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, JEANNETTE, , ,**

Mailing Address 873 CRESTVIEW CIRCLE

City  
FORT LAUDERDALEState  
FLZip Code  
33327-1847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708352**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, KARON, , ,**

Mailing Address 1345 165TH ST

City  
FORT SCOTTState  
KSZip Code  
66701-8344FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708713**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710191**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4263 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, ODESSA, , ,**

Mailing Address 520-16TH AVE NORTH

City  
NAMPAState  
IDZip Code  
83867-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709077

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWSState  
TXZip Code  
79714-2010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709799

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KARASIUK, KEN, , ,**

Mailing Address 5085 WAGNER WAY

City  
OAK PARKState  
CAZip Code  
91377-4706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709906

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4264 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAUFFMAN, CLAUDIA, , MS.,**

Mailing Address 3607 HONEYWOOD DRIVE

City  
JOHNSON CITYState  
TNZip Code  
37604-1480FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.65

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709662**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710401**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709016**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

165.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4265 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KENDALL, GAIL, , ,**

Mailing Address P.O. BOX 2706

City  
RANCHO SANTA FEState  
CAZip Code  
92067-2706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709403**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KENNEDY, MARY, , ,**

Mailing Address 1616 MAPLE AVENUE

City  
NOBLESVILLEState  
INZip Code  
46060-3014FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.43

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710012**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KENT, RUTH, , ,**

Mailing Address 2151 OAKLAND RD

City  
SAN JOSEState  
CAZip Code  
95131-1564FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708232**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4266 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KESSLER, RICHARD, , ,**

Mailing Address 4901 VINELAND RD

City  
ORLANDOState  
FLZip Code  
32811-7300FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
HOTELS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708825**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708219**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.91

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708617**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 4267 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708926**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUSHINER, GREGG, , ,**

Mailing Address 6732 BADGER LAKE CT

City  
NORTH LAS VEGASState  
NVZip Code  
89084-2388FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709191**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710332**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4268 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709837

Amount of Each Receipt this Period

7.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAURIE, BRUCE, , ,**

Mailing Address 25027 AGRARIAN RD

City  
RAMONAState  
CAZip Code  
92065-6344FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708924

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEAVENS, CAMERON, , ,**

Mailing Address 979 SYIDA DR.

City  
PACIFIC GROVEState  
CAZip Code  
93950-5327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAMERON LEAVENSOccupation (for Individual)  
LAND CARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

566.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708616

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.04



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4269 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEAVENS, CAMERON, , ,**

Mailing Address 979 SYIDA DR.

City  
PACIFIC GROVEState  
CAZip Code  
93950-5327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CAMERON LEAVENSOccupation (for Individual)  
LAND CARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709094**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708482**

Amount of Each Receipt this Period

44.18

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708613**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4270 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709251**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LESSY JR, ROY, , ,**

Mailing Address 64 BLACKPOOL RD

City  
REHOBOTH BEACHState  
DEZip Code  
19971-3511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709989**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LESSY JR, ROY, , ,**

Mailing Address 64 BLACKPOOL RD

City  
REHOBOTH BEACHState  
DEZip Code  
19971-3511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710127**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

142.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4271 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709406**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOGSDON, RANDALL, , ,**

Mailing Address 405 SEMINOLE PLACE

City  
LOUDONState  
TNZip Code  
37774-2114FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709728**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOGSDON, RANDALL, , ,**

Mailing Address 405 SEMINOLE PLACE

City  
LOUDONState  
TNZip Code  
37774-2114FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

437.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709731**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

28.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4272 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOGSDON, RANDALL, , ,**

Mailing Address 405 SEMINOLE PLACE

City  
LOUDONState  
TNZip Code  
37774-2114FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709739**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOGSDON, RANDALL, , ,**

Mailing Address 405 SEMINOLE PLACE

City  
LOUDONState  
TNZip Code  
37774-2114FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709787**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOOMIS, JOSEPH, , ,**

Mailing Address 2711 LOWER PODUNK ROAD

City  
NEW MILFORDState  
PAZip Code  
18834-7417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

213.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709455**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4273 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOWRY, DIANE, , ,**

Mailing Address 9 WOODRIDGE RD

City  
MOULTRIEState  
GAZip Code  
31768-5815FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.03

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708260

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710253

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUTTENBERGER, RUDY, , ,**

Mailing Address 17426 N 2ND PL

City  
PHOENIXState  
AZZip Code  
85022-1805FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

793.30

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709375

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

46.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4274 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACDONALD, MELANIE, , ,**

Mailing Address 7439 S BALBOA DR.

City  
MIDVALEState  
UTZip Code  
84047-2284FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ESSENTIAL AWAKENINGOccupation (for Individual)  
WELLNESS ADVOCATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709979**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MADER, PATRICIA, M., MRS.,**

Mailing Address 1710 HUDSON CIR

City  
GRAND ISLANDState  
NEZip Code  
68801-7473FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.11

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709386**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAKI, NEIL, J., DR.,**

Mailing Address 103 W 4TH ST

City  
THIBODAUXState  
LAZip Code  
70301-3107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709420**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

258.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4275 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANN, CATHY, C., MISS,**

Mailing Address 6101 S 25TH ST.

City  
LINCOLNState  
NEZip Code  
68512-2010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710198**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709255**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANSOUR, ALFRED, A., DR.,**

Mailing Address 3771 BELLAIRE BLVD

City  
HOUSTONState  
TXZip Code  
77025-1206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ACCESS RADIOLOGYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

847.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710385**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4276 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARGULIES, CORINNE, , ,**

Mailing Address 303 E 57TH STREET - APT 43B

City  
NEW YORKState  
NYZip Code  
10022-2693FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709810**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARKS, JULIE, , ,**

Mailing Address 5220 BLOSSOMWOOD CT

City  
FAIR OAKSState  
CAZip Code  
95628-3836FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708202**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARKS, JULIE, , ,**

Mailing Address 5220 BLOSSOMWOOD CT

City  
FAIR OAKSState  
CAZip Code  
95628-3836FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

352.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709880**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

187.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4277 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARSHALL, KENNETH, , ,**

Mailing Address 2 DARBY GLEN

City  
SAN ANTONIOState  
TXZip Code  
78257-1223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709916**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARSHALL, ROBERT, , ,**

Mailing Address 1886 SPRUCE CREEK BLVD

City  
PORT ORANGEState  
FLZip Code  
32128-6780FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

793.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709041**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, BARBARA, , ,**

Mailing Address 607 W CRAFT ST

City  
ROBINSONState  
ILZip Code  
62454-1133FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

431.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709612**

Amount of Each Receipt this Period

85.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

199.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4278 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTINO, BOB, , ,**

Mailing Address P.O. BOX 1101

City  
SKIPPACKState  
PAZip Code  
19474-1101FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.88

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708541

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708525

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

412.55

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708659

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4279 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709414**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710368**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASTERS, CARLTON , , ,**

Mailing Address 2127 BRICKELL AVENUE

City  
MIAMIState  
FLZip Code  
33129-2100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GOODWORKS INTERNATIONALOccupation (for Individual)  
DIPLOMAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

531.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708494**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4280 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAYHUGH, RICHARD, , ,**

Mailing Address 1112 TREYMOUR WAY

City  
KNOXVILLEState  
TNZip Code  
37922-5165FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710327**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCALLISTER, IDA, , ,**

Mailing Address 5911 E WOODLAWN DR. APT 114

City  
SPOKANE VALLEYState  
WAZip Code  
99212-0364FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VAOccupation (for Individual)  
PATIENT FINANCIAL SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709082**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCREA, DENISE, , ,**

Mailing Address 153 SENDERO VERDE

City  
SAN ANTONIOState  
TXZip Code  
78261-2308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708253**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

206.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4281 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCFARLAND, JO ANN, , ,**

Mailing Address 81708 AVENIDA DE BAILE

City  
INDIOState  
CAZip Code  
92203-4101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708535**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCFERRIN, JAMES, W., MR.,**

Mailing Address 125 BEVERLY ROAD NE

City  
ATLANTAState  
GAZip Code  
30309-2655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
U. S. ELECTRICOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709566**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCGARRAUGH, ROBIN, , ,**

Mailing Address 12139 COUNTY RD H

City  
PERRYTONState  
TXZip Code  
79070-6333FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BADGER OPERATIONSOccupation (for Individual)  
OIL GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708451**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4282 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCGINNIS, CHARLES, R., MR.,**

Mailing Address 447 WOODHILL DR

City  
OWINGS MILLSState  
MDZip Code  
21117-1372FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MANAGER OF DEPT OF DEFENSEOccupation (for Individual)  
ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708808**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCGINNIS, SCOTT, , ,**

Mailing Address 45A POPPY LOOP LANE

City  
JASPERState  
ALZip Code  
35504-0007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708866**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCMAHAN, HOWARD, C., MRS.,**

Mailing Address PO BOX 779

City  
OCILLAState  
GAZip Code  
31774-0779FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FAMILY PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

358.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708440**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4283 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCMAHON, STEWART, , ,**

Mailing Address 25885 LAKE SHORE LANE

City  
MORENO VALLEYState  
CAZip Code  
92551-1651FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MACHINERY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708882**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCMULLEN, TIMOTHY, , ,**

Mailing Address 17 BAIER DR.

City  
ROCHESTERState  
NYZip Code  
14606-5311FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708631**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCPHEARSON, FORREST, , ,**

Mailing Address 71178 CLIPPER PL

City  
ABITA SPRINGSState  
LAZip Code  
70420-3466FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708501**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

137.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4284 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCVEA, TOM, , MR.,**

Mailing Address PO BOX 249

City  
ST FRANCISVLEState  
LAZip Code  
70775-0249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709463**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEEHAN, JOAN, , ,**

Mailing Address 2874 GOLDEN GATE AVE

City  
SAN FRANCISCOState  
CAZip Code  
94118-4111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1962.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709305**

Amount of Each Receipt this Period

114.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERIWETHER, NORMA, C., MS.,**

Mailing Address 28 LOST POND

City  
NELLYSFORDState  
VAZip Code  
22958-8004FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708464**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.41



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4285 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIKUS, PAULINE, , ,**

Mailing Address 1304 ABBEY RD

City  
ROUND ROCKState  
TXZip Code  
78681-6482FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708302**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, ERNEST, , , JR.**

Mailing Address 2807-17 AVENUE

City  
VIENNAState  
WVZip Code  
26105-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709442**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, JAMES, E., ,**

Mailing Address 2235 DEXTER RD.

City  
AUBURN HILLSState  
MIZip Code  
48326-2307FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

471.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709472**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4286 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.16

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708426**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.16

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709549**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.16

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710227**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.19

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4287 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELL

State  
NM

Zip Code  
88201-8659

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

**Transaction ID : SA11A.27710361**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAM

State  
AL

Zip Code  
35213-3606

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

**Transaction ID : SA11A.27709646**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOLLOY, JOHN, , ,**

Mailing Address 36 PATIKY STREET

City  
KINGS PARK

State  
NY

Zip Code  
11754-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

**Transaction ID : SA11A.27710125**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

59.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4288 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONDRAGON, RAY, , MR.,**

Mailing Address 4612 HAINES AVE NE

City  
ALBUQUERQUEState  
NMZip Code  
87110-5005FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709245**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONKE, SHEILA, , MS.,**

Mailing Address 12230 COUNTY ROAD P1

City  
NICKERSONState  
NEZip Code  
68044-2595FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AGRICULTURE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709732**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708959**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

334.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4289 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOOERS, JUDITH, , ,**

Mailing Address 1395 CEDAR POINT RD.

City  
HEATHSVILLEState  
VAZip Code  
22473-4007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NOT EMPLOYEDOccupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709061**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOORCROFT, GARY, , ,**

Mailing Address P.O. BOX 1708

City  
OLDSMARState  
FLZip Code  
34677-1708FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709060**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORGAN, BRENT, , ,**

Mailing Address 7626 NELSON SPUR RD

City  
HIXSONState  
TNZip Code  
37343-1840FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INTEGRITY AUTOMOTIVE GROUPOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710150**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25140.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4290 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORRIS, MIKE , , ,**

Mailing Address 578 SNAPDRAGON WAY

City  
IMPERIALState  
CAZip Code  
92251-8947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

842.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709288**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORRICAL, PATRICIA, K., ,**

Mailing Address 5682 COUNTRY LAKES DR

City  
SARASOTAState  
FLZip Code  
34243-3811FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709131**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOURAD, ANTHONY, , ,**Mailing Address 1355 S PORTOFINO DR.  
APT 101City  
SARASOTAState  
FLZip Code  
34242-3140FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

410.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710248**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.70

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4291 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTON

State  
VA

Zip Code  
22124-2262

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

02 / 21 / 2025

**Transaction ID : SA11A.27710081**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTON

State  
VA

Zip Code  
22124-2262

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

02 / 21 / 2025

**Transaction ID : SA11A.27710082**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTON

State  
VA

Zip Code  
22124-2262

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

02 / 21 / 2025

**Transaction ID : SA11A.27710083**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

146.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4292 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710088

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710089

Amount of Each Receipt this Period

83.28

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710091

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

142.68



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4293 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710093

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710097

Amount of Each Receipt this Period

83.28

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710101

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

154.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4294 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOWBRAY, ALAN, , ,**

Mailing Address 3215 FOXVALE DRIVE

City  
OAKTONState  
VAZip Code  
22124-2262FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.32

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710107**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MUELLER, JUDY, , ,**

Mailing Address 20906 W SNOWBERRY LN

City  
PLAINFIELDState  
ILZip Code  
60544-7495FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.95

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710189**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUELLER, JUDY, , ,**

Mailing Address 20906 W SNOWBERRY LN

City  
PLAINFIELDState  
ILZip Code  
60544-7495FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.95

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710214**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4295 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUELLER, VALERIE, , ,**

Mailing Address PO BOX 2863

City  
GULFPORTState  
MSZip Code  
39505-2863FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RPMPIZZAOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708817**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NARANG, PAUL, JOHN, MR.,**Mailing Address 8450 82ND STREET  
APT 110City  
PLEASANT PRAIRIEState  
WIZip Code  
53158-2536FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DELOITTEOccupation (for Individual)  
INFORMATION TECHNOLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708523**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

856.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709610**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4296 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709821**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709848**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NGUYEN, TOAN, , ,**

Mailing Address 472 ILCREST DR.

City  
HOUSTONState  
TXZip Code  
77042-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708949**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4297 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NICOSON, JON, , ,**

Mailing Address 2075 W CR100S

City  
CORYState  
INZip Code  
47846-8026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NICOSON FARMS INCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708323**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NORSWORTHY, MANDY, , ,**

Mailing Address 11 HUNTINGTON PL

City  
JACKSONState  
TNZip Code  
38305-9665FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SBO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708960**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NOTTINGHAM, MARGARETE, , ,**

Mailing Address PO BOX 236

City  
CARTERState  
MTZip Code  
59420-0236FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710421**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

184.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4298 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOTTINGHAM, MARGARETE, , ,**

Mailing Address PO BOX 236

City  
CARTERState  
MTZip Code  
59420-0236FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710423

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOTTINGHAM, MARGARETE, , ,**

Mailing Address PO BOX 236

City  
CARTERState  
MTZip Code  
59420-0236FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710424

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NOTTINGHAM, MARGARETE, , ,**

Mailing Address PO BOX 236

City  
CARTERState  
MTZip Code  
59420-0236FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710425

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

74.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4299 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOTTINGHAM, MARGARETE, , ,**

Mailing Address PO BOX 236

City  
CARTERState  
MTZip Code  
59420-0236FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710426

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOTTINGHAM, MARGARETE, , ,**

Mailing Address PO BOX 236

City  
CARTERState  
MTZip Code  
59420-0236FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710427

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'FLYNN, ARMINDA, , ,**

Mailing Address 12864 BISCAYNE BLVD

City  
N. MIAMIState  
FLZip Code  
33181-2007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

992.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709116

Amount of Each Receipt this Period

45.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.26

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4300 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLSON, SHARON, , ,**

Mailing Address 1239 O'LEARY DRIVE

City  
JOLIET

State  
IL

Zip Code  
60431-8954

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.21

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025

**Transaction ID : SA11A.27709967**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, SHARON, , ,**

Mailing Address 1239 O'LEARY DRIVE

City  
JOLIET

State  
IL

Zip Code  
60431-8954

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.21

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025

**Transaction ID : SA11A.27709973**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PALERMO, MARK, , ,**

Mailing Address 246 GARFIELD PL

City  
BROOKLYN

State  
NY

Zip Code  
11215-2207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
LAWYER, INVESTOR, CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

748.48

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025

**Transaction ID : SA11A.27708693**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

67.67



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4301 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAPPAS, JAMES, , ,**

Mailing Address 6202 APPIAN WAY

City  
RIVERSIDEState  
CAZip Code  
92506-4555FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709284**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARKER, BRUCE, E., ,**

Mailing Address 320 IVYWOOD LANE

City  
NAPLESState  
FLZip Code  
34112-7239FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710194**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKS, JENNIE, , ,**

Mailing Address 386 W TROXELL RD

City  
OAK HARBORState  
WAZip Code  
98277-7909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

521.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709523**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4302 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARKS, JENNIE, , ,**

Mailing Address 386 W TROXELL RD

City  
OAK HARBORState  
WAZip Code  
98277-7909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709928**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, CAROLYN, L., ,**

Mailing Address 2216 CAYUSE ST

City  
TWIN FALLSState  
IDZip Code  
83301-5685FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709301**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, EDWIN, , ,**

Mailing Address 2061 SE ACADEMY ST

City  
DALLASState  
ORZip Code  
97338-1965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709515**

Amount of Each Receipt this Period

13.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4303 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PENDARVIS, EDWARD, , ,**

Mailing Address 565 SAVANNAH HWY

City  
CHARLESTONState  
SCZip Code  
29407-7209FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SUNBELT BUS BKROccupation (for Individual)  
BUSINESS BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708865**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709965**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PICKLE, JAMES, , ,**

Mailing Address 8260 CHULA CREEK RD

City  
CHATTANOOGAState  
TNZip Code  
37421-3283FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

241.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709028**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4304 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PLUMMER, ROBERT, KEMP, ,**

Mailing Address 4308 VILLAGE DR

City  
TRINITYState  
NCZip Code  
27370-9492FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708348**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PLUMMER, ROBERT, KEMP, ,**

Mailing Address 4308 VILLAGE DR

City  
TRINITYState  
NCZip Code  
27370-9492FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708351**

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PLUMMER, ROBERT, KEMP, ,**

Mailing Address 4308 VILLAGE DR

City  
TRINITYState  
NCZip Code  
27370-9492FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708355**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4305 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708765**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PUGSLEY, CHARLES, , ,**

Mailing Address 9101 BRIDGEVIEW CT

City  
FREDERICKSBURGState  
VAZip Code  
22407-9281FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709951**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PYLES, RICHARD, , ,**

Mailing Address 5402 DUTTON AVE

City  
NORTH CHARLESTONState  
SCZip Code  
29406-3761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TANK INDUSTRY CONSULTANTSOccupation (for Individual)  
TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708503**

Amount of Each Receipt this Period

17.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4306 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RADY, PAUL, M., MR.,**

Mailing Address 4 MOCKINGBIRD LN

City  
ENGLEWOODState  
COZip Code  
80113-4813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANTERO RESOURCESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8901.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708421

Amount of Each Receipt this Period

94.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REILLY, MICHAEL, H., MR.,**

Mailing Address 223 NORTH VAN DIEN AVENUE

City  
RIDGEWOODState  
NJZip Code  
07450-2726FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RIDGEWOOD PATHOLOGY GROUP, PAOccupation (for Individual)  
PATHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710192

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RENNHACK, SHARON, , ,**

Mailing Address 1700 NW 74 AVENUE

City  
PLANTATIONState  
FLZip Code  
33313-4404FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709100

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

182.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4307 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RENTOF, PETER, , ,**Mailing Address 235 EAST 22ND STREET  
7DCity  
NEW YORKState  
NYZip Code  
10010-4635FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710294**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RHODES, MICHELLE, , ,**

Mailing Address 590 MOOR WAY

City  
SAINT ALBANSState  
MOZip Code  
63073-1221FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709772**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICHARDSON, CONRAD, , ,**

Mailing Address 234 CAHABA OAKS TRL

City  
INDIAN SPRINGSState  
ALZip Code  
35124-3333FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708452**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

165.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4308 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709321**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709808**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709844**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4.16



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4309 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709852**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710292**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708250**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4310 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIVERO, JORGE, , ,**

Mailing Address 377 EAGLE CREEK CIR

City  
LAKE MARYState  
FLZip Code  
32746-3830FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708429

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, JAMES, , ,**

Mailing Address 2034 MOFFITT CREEK RD

City  
BLACKSTOCKState  
SCZip Code  
29014-8845FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709498

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, JAMES, , ,**

Mailing Address 2034 MOFFITT CREEK RD

City  
BLACKSTOCKState  
SCZip Code  
29014-8845FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709503

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4311 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, JAMES, , ,**

Mailing Address 2034 MOFFITT CREEK RD

City  
BLACKSTOCKState  
SCZip Code  
29014-8845FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709633**

Amount of Each Receipt this Period

17.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBY, JUDD, , ,**

Mailing Address 5048 TUXEDO BLVD

City  
MOUNDState  
MNZip Code  
55364-9254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708600**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROE, JOAN, , MRS.,**

Mailing Address 360 W NOKOMIS CT

City  
FOX POINTState  
WIZip Code  
53217-2611FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

632.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710396**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4312 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROLKER, JOHN, G., MR.,**

Mailing Address 14 W SARATOGA ST

City  
BALTIMOREState  
MDZip Code  
21201-4207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708297

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROWAN, LORI, , ,**

Mailing Address 10394 MARBLE EGRET DRIVE

City  
JACKSONVILLEState  
FLZip Code  
32257-4768FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708885

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708288

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

138.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4313 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709541**

Amount of Each Receipt this Period

2.06

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709804**

Amount of Each Receipt this Period

2.57

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708212**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4314 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708206**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANCHEZ, THOMAS, , ,**

Mailing Address 12140 BEATY AVE

City  
NORWALKState  
CAZip Code  
90650-1923FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708875**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANDERS, MELVIN, , ,**

Mailing Address 4039 MAYFLOWER CT SW

City  
LILBURNState  
GAZip Code  
30047-3206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709997**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

58.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4315 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANTORO, NANCY, , ,**

Mailing Address P.O. BOX 2095

City  
RANCHO SANTA FEState  
CAZip Code  
92067-2095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1476.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709171**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHATTYN, JOHN, , MR.,**

Mailing Address 129 CROCKETT DR.

City  
KERRVILLEState  
TXZip Code  
78028-8114FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709595**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHIPPER, GERRIT, , ,**

Mailing Address 2344 DIXON RD

City  
FREDERICKState  
MDZip Code  
21704-8131FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CWCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710286**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

224.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4316 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHMIDT, RAYMOND, , ,**

Mailing Address 2844 N LAKEVIEW STREET

City  
LUDINGTONState  
MIZip Code  
49431-9466FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709630**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHRIVER, LAURA, , ,**

Mailing Address 2645 EDGE HILL RD

City  
HUNTINGDON VALLEYState  
PAZip Code  
19006-5519FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708805**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHRUM, VALERIE, , ,**

Mailing Address 8654 WEDGEWOOD LN N

City  
MAPLE GROVEState  
MNZip Code  
55369-4615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

399.80

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709619**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

169.80



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4317 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHUMAN, JAMES, , ,**

Mailing Address 106 POGUE AVE

City  
EASTLANDState  
TXZip Code  
76448-3005FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
J & J AIR CONDITIONINGOccupation (for Individual)  
A/C SALES & SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709856**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHWARTZ, JAMES, F., MR.,**

Mailing Address 60455 DESERT SHADOW DRIVE

City  
LA QUINTAState  
CAZip Code  
92253-7726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709815**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHWARTZ, JAMES, F., MR.,**

Mailing Address 60455 DESERT SHADOW DRIVE

City  
LA QUINTAState  
CAZip Code  
92253-7726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

326.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709876**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4318 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SELIG, ROBERT, J., ,**

Mailing Address 65 JOLLEY DR APT 331

City  
BLOOMFIELDState  
CTZip Code  
06002-4251FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710026**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHALLER, NELSON, , ,**

Mailing Address 17898 ABERDEEN WAY

City  
BOCA RATONState  
FLZip Code  
33496-1411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2568.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709081**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHANNON, JANICE, , MS.,**

Mailing Address 5524 WILLOW VIEW TRL

City  
MORRISONState  
COZip Code  
80465-2279FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FRANCHISE DAIRY QUEEN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1041.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708684**

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

631.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4319 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHAYS, LORRAINE, , ,**

Mailing Address 14659 CANALVIEW DRIVE APT A

City  
DELRAY BEACHState  
FLZip Code  
33484-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708715**

Amount of Each Receipt this Period

10.89

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHEIKH, JAMIL, , ,**Mailing Address 1345 AVENUE OF THE AMERICAS  
2ND FLOORCity  
NEW YORKState  
NYZip Code  
10105-0302FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JSARCHITECTSOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709881**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHOEMAKE, JAMES, , ,**

Mailing Address 3202 ROBINSON ROAD

City  
MISSOURI CITYState  
TXZip Code  
77459-3234FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709291**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.89

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4320 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOOP, BEV, , ,**

Mailing Address 843 N. WOODLAWN AVE.

City  
KIRKWOODState  
MOZip Code  
63122-2949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.57

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709867**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHUGER, JILL, , ,**

Mailing Address N7756 BUSHEY RD

City  
TREGOState  
WIZip Code  
54888-9327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709139**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIEWERT, CHARLES, R., ,**

Mailing Address 6067 HOGAN DR N

City  
KEIZERState  
ORZip Code  
97303-7445FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708227**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

32.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4321 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIEWERT, CHARLES, R., ,**

Mailing Address 6067 HOGAN DR N

City  
KEIZERState  
ORZip Code  
97303-7445FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708251

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIEWERT, CHARLES, R., ,**

Mailing Address 6067 HOGAN DR N

City  
KEIZERState  
ORZip Code  
97303-7445FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709655

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIGMOND, ERIC, , ,**

Mailing Address 3010 3RD ST. NW

City  
SIDNEYState  
MTZip Code  
59270-5902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SIDNEY HEALTH CENTEROccupation (for Individual)  
ORTHOPAEDIC SURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

506.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710000

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

138.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4322 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIWIK, DEBORAH, , ,**

Mailing Address 1750 5TH STREET DR. NW

City  
HICKORYState  
NCZip Code  
28601-5206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709006**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLOTTERBECK, SCOTT, F., MR.,**

Mailing Address 9034 RAWHIDE WAY

City  
SACRAMENTOState  
CAZip Code  
95826-2113FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SOUND MIXER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708848**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, MICHAEL, A., MR.,**

Mailing Address P.O. BOX 971

City  
MIDDLEBURGState  
VAZip Code  
20118-0971FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VALLEY PROTEINS, INC.Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

8274.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709681**

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1102.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4323 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, SANDRA, , ,**

Mailing Address 825 REDBUD DR

City  
GREENEVILLEState  
TNZip Code  
37743-6141FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.44

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708221**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708176**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708205**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4324 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709341**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708803**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709008**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4325 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPENCE, KATHRYN, , MS.,**

Mailing Address 1301 LARYN LN

City  
LEXINGTONState  
SCZip Code  
29072-8288FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708759**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPIX, BRIAN, K., MR.,**

Mailing Address 1910 RIDGEFIELD CT

City  
ROSWELLState  
GAZip Code  
30075-4115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LEVEL ONE CONSTRUCTION CO LLCOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708512**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STALLINGS, BILL, , ,**

Mailing Address 7611 A JANAK DR

City  
HOUSTONState  
TXZip Code  
77055-3609FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709360**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

206.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4326 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709666**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STIMSON, JOHN, , ,**

Mailing Address 11680 WEST ALFRED COURT

City  
BOISEState  
IDZip Code  
83713-1893FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709013**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STONE, WILLIAM, , ,**

Mailing Address 2464 HEDIGHAM BLVD

City  
WIXOMState  
MIZip Code  
48393-1720FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.94

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709618**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4327 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRECKER, GARY, , ,**

Mailing Address 8007 WHITE OAK AVE

City  
RESEDAState  
CAZip Code  
91335-1534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710416

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STUDINKA, JOYCE, , ,**

Mailing Address 145 WOODMONT DR

City

BIRMINGHAM

State

AL

Zip Code

35209-6627

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709239

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SULLIVAN, LORI, , ,**

Mailing Address 1061 SUNNYBROOK CIRCLE

City

BASSETT

State

VA

Zip Code

24055-3291

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709624

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4328 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUTPHEN, GEORGE, , MR.,**

Mailing Address 5501 SAWGRASS CT

City  
GARLANDState  
TXZip Code  
75044-5035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710338**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULAState  
MTZip Code  
59804-5849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.60

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708467**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THATCHER, PATRICIA, , ,**

Mailing Address 318 ROSEMARY ST

City  
SMYRNAState  
TNZip Code  
37167-5257FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

324.34

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27708647**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.10

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4329 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THEBERGE, BARBARA, , MS.,

Mailing Address P.O. BOX 181289

City  
CORONADOState  
CAZip Code  
92178-1289FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MGMT GROUP OF CORONADOOccupation (for Individual)  
REAL ESTATE MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710419

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMA, BARBARA, , ,

Mailing Address 47 CORDOBA POINT

City  
SUNRISE BEACHState  
MOZip Code  
65079-5810FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709039

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMAS, JEANNE, , ,

Mailing Address 5 HIBISCUS LANE

City  
AYERState  
MAZip Code  
01432-1550FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MESSAGE THERAPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

241.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708641

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1072.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4330 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMAS, JEANNE, , ,**

Mailing Address 5 HIBISCUS LANE

City  
AYERState  
MAZip Code  
01432-1550FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MESSAGE THERAPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709527**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, BEAM, , ,**Mailing Address 55 S KUKUI ST  
APT D2702City  
HONOLULUState  
HIZip Code  
96813-2326FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708558**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TIMBROOK, MARILYN, , ,**

Mailing Address 4550 FRINGETREE D

City  
MURRELLS INLETState  
SCZip Code  
29576-4356FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710311**

Amount of Each Receipt this Period

10.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4331 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TODD, THOMAS, R., MR.,**

Mailing Address 504 SHERWOOD DR

City  
VICTORIAState  
TXZip Code  
77901-4532FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US CIVIL SERVICEOccupation (for Individual)  
SOCIAL SECURITY EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708235**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TODD, THOMAS, R., MR.,**

Mailing Address 504 SHERWOOD DR

City  
VICTORIAState  
TXZip Code  
77901-4532FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US CIVIL SERVICEOccupation (for Individual)  
SOCIAL SECURITY EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708507**

Amount of Each Receipt this Period

21.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRACHTMAN, KAREN, , ,**

Mailing Address 26 SCHERMERHORN ST

City  
BROOKLYNState  
NYZip Code  
11201-4803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708432**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4332 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709422**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TYPER, DONALD, R., MR.,**

Mailing Address 410 N WEAVER ST

City  
HESSTONState  
KSZip Code  
67062-9041FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLC REALESTATE SERVICESOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709143**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. URREIZTIETA, IREL, , ,**

Mailing Address 180 KODIAK ST

City  
MORRO BAYState  
CAZip Code  
93442-3016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

477.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708332**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.42



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4333 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. URREIZTIETA, IREL, , ,**

Mailing Address 180 KODIAK ST

City  
MORRO BAYState  
CAZip Code  
93442-3016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708487**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAN BOMMEL, ROBIN, , ,**

Mailing Address 6205 KHLOE COURT

City  
NINE MILE FALLSState  
WAZip Code  
99026-8319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709001**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709164**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4334 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VANDERSPEK, DONNA, , ,**

Mailing Address 840 40TH AVENUE NORTHEAST

City  
WILLMARState  
MNZip Code  
56201-9203FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708719**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAWTER, STEVE, , ,**

Mailing Address 1701 CATALINA AVE

City  
SEAL BEACHState  
CAZip Code  
90740-5710FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708679**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VERPLANCK, JAMES, S., MR.,**

Mailing Address 3525 BRIDGEFIELD DR.

City  
LAKELANDState  
FLZip Code  
33803-5912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27710289**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4335 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VIDAL, MILLIE, , ,

Mailing Address 280 ACACIA AVE

City  
SAN BRUNOState  
CAZip Code  
94066-4845FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710144

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VO, HONG, , ,

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708220

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VO, HONG, , ,

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710382

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4336 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALLACE, FRANK, , ,**

Mailing Address 2496 BIRNAM WOODS WAY

City  
GAINESVILLEState  
FLZip Code  
32605-1620FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708433**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WARD, CAROL, , MS.,**

Mailing Address 14300 JACKSON RD

City  
SLOUGHHOUSEState  
CAZip Code  
95683-9712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708995**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATKINS, MARK, A., MR.,**

Mailing Address 304 EAST LAKE GENEVA ROAD NE

City  
ALEXANDRIAState  
MNZip Code  
56308-8906FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENEVA CAPITAL LLCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708834**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4337 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATT, CAROL, , ,**

Mailing Address 1470 RHODE ISLAND ST.

City  
LOVELANDState  
COZip Code  
80538-6831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710367

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEATHERLY, CINDI, , ,**

Mailing Address 4690 MEADOW SPRINGS DRIVE

City  
WATKINSVILLEState  
GAZip Code  
30677-4642FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710094

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEATHERMAN, GLENNA, F., ,**

Mailing Address 853 S NEWHAVEN DR.

City  
ORANGEState  
CAZip Code  
92869-5443FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708746

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

81.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4338 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEBSTER, DANIEL, , ,**

Mailing Address 15724 LAKE HODGE CT

City  
CLERMONTState  
FLZip Code  
34711-9655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOUSE OF REPRESENTATIVESOccupation (for Individual)  
MEMBER OF CONGRESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709974

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITEMORE, BEBE, , ,**

Mailing Address 4785 MURFREESBORO ROAD

City  
ARRINGTONState  
TNZip Code  
37014-9171FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27708742

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITEMORE, BEBE, , ,**

Mailing Address 4785 MURFREESBORO ROAD

City  
ARRINGTONState  
TNZip Code  
37014-9171FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709128

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4339 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, BETTY, , ,**

Mailing Address 311 HARPER LOOP

City  
GRANTS PASSState  
ORZip Code  
97527-5339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27708561**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, BLAKE, , , JR.**

Mailing Address 155 SUMMERFIELD DR.

City  
JACKSONState  
TNZip Code  
38305-9794FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709601**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMSON, GARY, , ,**

Mailing Address 817 WEST FRONT STREET

City  
SEALYState  
TXZip Code  
77474-3422FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

417.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11A.27709269**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4340 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, ELIZABETH, , ,**

Mailing Address P.O. BOX 2453

City  
PALMER

State  
AK

Zip Code  
99645-2453

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.73

Date of Receipt

**02** / **21** / **2025**

**Transaction ID : SA11A.27710389**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, MICHAEL, , ,**

Mailing Address 126 BRIARWOOD DR.

City  
WINCHESTER

State  
VA

Zip Code  
22603-4403

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SKYEPOINT DECISIONS

Occupation (for Individual)  
IT CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**02** / **21** / **2025**

**Transaction ID : SA11A.27710130**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINKLEBLACK, SUE, , ,**

Mailing Address 509 SAINT FRANCIS RD

City  
EUFAULA

State  
AL

Zip Code  
36027-9524

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

213.34

Date of Receipt

**02** / **21** / **2025**

**Transaction ID : SA11A.27710250**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

122.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4341 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YU, STEVE, , ,**

Mailing Address 301 RIDGEMONT AVENUE

City  
ROCKVILLEState  
MDZip Code  
20850-6061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27710407

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZACHACZ, KATRINA, , ,**

Mailing Address 18111 WAVERLY DR.

City  
SNOHOMISHState  
WAZip Code  
98296-8068FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709134

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZACHACZ, KATRINA, , ,**

Mailing Address 18111 WAVERLY DR.

City  
SNOHOMISHState  
WAZip Code  
98296-8068FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

246.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2025

Transaction ID : SA11A.27709650

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

323.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4342 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZAVARZINA, ANYA, , ,**

Mailing Address 802 N DELAWARE ST, 211

City  
SAN MATEOState  
CAZip Code  
94401-1514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GALLIUM ARTISTIC SERVICES SIMSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.60

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709555**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZAVARZINA, ANYA, , ,**

Mailing Address 802 N DELAWARE ST, 211

City  
SAN MATEOState  
CAZip Code  
94401-1514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GALLIUM ARTISTIC SERVICES SIMSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.60

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709557**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZAVARZINA, ANYA, , ,**

Mailing Address 802 N DELAWARE ST, 211

City  
SAN MATEOState  
CAZip Code  
94401-1514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GALLIUM ARTISTIC SERVICES SIMSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.60

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710390**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4343 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZGORSKI, DAWN, , ,**

Mailing Address 1723 BRODBECK ROAD

City  
HAMPSTEADState  
MDZip Code  
21074-1541FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.03

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27709724**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZHANG, YONGHUI, , ,**

Mailing Address 195 MONROE DR

City  
PALO ALTOState  
CAZip Code  
94306-4416FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2025**Transaction ID : SA11A.27710420**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11C.27710444**

Amount of Each Receipt this Period

92427.62

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

153.03

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4344 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713339

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713342

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713343

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

62.16

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4345 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABUID, JULIA, , ,**

Mailing Address P.O. BOX 921495

City  
SYLMAR

State  
CA

Zip Code  
91392-1495

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

**02** / **22** / **2025**

**Transaction ID : SA11A.27713345**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABUID, JULIA, , ,**

Mailing Address P.O. BOX 921495

City  
SYLMAR

State  
CA

Zip Code  
91392-1495

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

**02** / **22** / **2025**

**Transaction ID : SA11A.27713346**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABUID, JULIA, , ,**

Mailing Address P.O. BOX 921495

City  
SYLMAR

State  
CA

Zip Code  
91392-1495

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

752.84

Date of Receipt

**02** / **22** / **2025**

**Transaction ID : SA11A.27713348**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

21.50

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4346 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ADAMS, SUSAN, , ,

Mailing Address 10247 LARK MOUNTAIN DRIVE

City  
HOUSTONState  
TXZip Code  
77064-5532FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713121

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ADKINS, MARY, , ,

Mailing Address 416 SW 725TH RD

City  
CHILHOWEEState  
MOZip Code  
64733-9229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713266

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AHN, ROGER, , ,

Mailing Address 2807 NORTH 160 STREET

City  
OMAHAState  
NEZip Code  
68116-2061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

373.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710883

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

134.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4347 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AINE, HARRY, , ,**

Mailing Address 930 TAHOE BOULEVARD

City  
INCLINE VILLAGEState  
NVZip Code  
89451-9451FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710810**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALIOTA, PAULETTE, , ,**

Mailing Address 538 MARGO COURT

City  
ERIEState  
PAZip Code  
16505-2112FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711381**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713220**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4348 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMSTUTZ, SHERYL, , ,**Mailing Address 1307 S WATER ST  
UNIT 90City  
SILVERTONState  
ORZip Code  
97381-2471FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

866.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711647**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CLAUDIA, , ,**

Mailing Address 1625 WEST LOIS MEADOWS COURT

City  
BLUFFDALEState  
UTZip Code  
84065-5225FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711536**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, CYNNIE, , ,**

Mailing Address 55 RODEO AVENUE # 5

City  
SAUSALITOState  
CAZip Code  
94965-1738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

349.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710712**

Amount of Each Receipt this Period

32.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4349 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711649**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.54

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712137**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.54

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712141**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4350 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, MIKE, , ,

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712144

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDERSON, MIKE, , ,

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712151

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDERSON, SUE, , ,

Mailing Address 1044 CHURCH ST., NO.134

City  
SULPHUR SPRINGSState  
TXZip Code  
75482-2272FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713176

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4351 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARBOGAST, STEVE, , ,**

Mailing Address 175 SEA DUNES DR.

City  
MELBOURNE BEACHState  
FLZip Code  
32951-3313FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712392**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AVELINO, MARCIAL, , ,**

Mailing Address 728 CHATSWORTH DRIVE

City  
ACCOKEEKState  
MDZip Code  
20607-2003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.69

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710539**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AZZATO, JOE, , ,**

Mailing Address 3333 CLARKSBURG DRIVE

City  
AUSTINState  
TXZip Code  
78745-5809FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KEYSIGHT TECHNOLOGIESOccupation (for Individual)  
QA TESTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.11

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712650**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4352 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BALL, DAVID, , ,**

Mailing Address P.O. BOX 242

City  
ALEXANDERState  
ARZip Code  
72002-0242FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MID STATES SUPPLYOccupation (for Individual)  
VALVE ACTUATION SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713106**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BALTHASER, MARY ANN, , ,**

Mailing Address 26 LITTLEJOHN LN

City  
ROCKLEDGEState  
FLZip Code  
32955-2411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.50

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712039**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARRON, REGINA, , ,**

Mailing Address 38 HAWTHORNE ESTATES

City  
ST LOUISState  
MOZip Code  
63131-3029FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

302.10

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711869**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

169.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4353 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BATTMER, ROBERT, E., DR.,**

Mailing Address 3700 W 83RD ST.  
SUITE 202

City  
PRAIRIE VILLAGE

State  
KS

Zip Code  
66208-5120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

**Transaction ID : SA11A.27711696**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEASLEY, ROGER, , ,**

Mailing Address 6503 SANTOLINA COVE

City  
AUSTIN

State  
TX

Zip Code  
78731-2806

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROGER BEASLEY

Occupation (for Individual)  
AUTO DLR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

**Transaction ID : SA11A.27711297**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BECKWITH, ART, , MR.,**

Mailing Address P.O. BOX 1029, 507 BUS.

City  
PROGRESO

State  
TX

Zip Code  
78579-1029

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.05

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

**Transaction ID : SA11A.27713218**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

255.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4354 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711980**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711983**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.06

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711985**

Amount of Each Receipt this Period

3.55

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4355 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711990

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711993

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712009

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

18.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4356 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BELLINO, LAURA, , ,**

Mailing Address 116 CARRIAGE LAMP WAY

City  
PONTE VEDRA BEACHState  
FLZip Code  
32082-1903FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713168**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BENNETT, ALBERT, , ,**

Mailing Address 200 MORRILL RD

City  
STARKVILLEState  
MSZip Code  
39759-5390FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711416**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BENTLEY, DELORES, , ,**

Mailing Address 4418 ROSSER SQ

City  
DALLASState  
TXZip Code  
75244-6648FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HCAOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

349.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710574**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

252.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4357 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERNABE, MARIA, LOURDES, ,**

Mailing Address 11014 ELDORA AVE

City  
SUNLANDState  
CAZip Code  
91040-2005FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712056**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERNHARDT, FREDERICK, , ,**

Mailing Address 29 BRUNO CRESCENT

City  
TRENTONState  
NJZip Code  
08620-1605FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711933**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BISHOP, GLORIA, , ,**

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGOState  
ORZip Code  
97034-7595FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710968**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

243.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4358 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BISHOP, GLORIA, , ,**

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGOState  
ORZip Code  
97034-7595FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.23

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710969**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BISHOP, GLORIA, , ,**

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGOState  
ORZip Code  
97034-7595FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.23

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710970**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BISHOP, GLORIA, , ,**

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGOState  
ORZip Code  
97034-7595FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.23

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710971**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.91

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4359 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BISHOP, GLORIA, , ,**

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGO

State  
OR

Zip Code  
97034-7595

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.23

Date of Receipt

**02** / **22** / **2025**

**Transaction ID : SA11A.27710974**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BISHOP, GLORIA, , ,**

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGO

State  
OR

Zip Code  
97034-7595

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.23

Date of Receipt

**02** / **22** / **2025**

**Transaction ID : SA11A.27710975**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BISHOP, GLORIA, , ,**

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGO

State  
OR

Zip Code  
97034-7595

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.23

Date of Receipt

**02** / **22** / **2025**

**Transaction ID : SA11A.27710976**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

52.91

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4360 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BISHOP, GLORIA, , ,**

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGO

State  
OR

Zip Code  
97034-7595

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.23

Date of Receipt

**02** / **22** / **2025**

**Transaction ID : SA11A.27710979**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BISHOP, GLORIA, , ,**

Mailing Address 1973 CHERYL COURT

City  
LAKE OSWEGO

State  
OR

Zip Code  
97034-7595

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.23

Date of Receipt

**02** / **22** / **2025**

**Transaction ID : SA11A.27710980**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BISHOP, JEFF, , MR.,**

Mailing Address 597 PINEY POINT RD

City  
HOUSTON

State  
TX

Zip Code  
77024-5231

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BISHOP LIFTING PRODUCTS

Occupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

373.39

Date of Receipt

**02** / **22** / **2025**

**Transaction ID : SA11A.27712488**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

91.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4361 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BISHOP, JEFF, , MR.,**

Mailing Address 597 PINEY POINT RD

City  
HOUSTONState  
TXZip Code  
77024-5231FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BISHOP LIFTING PRODUCTSOccupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.39

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712496**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLOSSMAN, ALFRED, R., MR., JR.**

Mailing Address 16 BLOSSMAN LN.

City  
COVINGTONState  
LAZip Code  
70433-4707FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713309**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLUHM, JAMES, E., MR.,**

Mailing Address 16376 SE 89TH TERRACE

City  
SUMMERFIELDState  
FLZip Code  
34491-5804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

424.80

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713294**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4362 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLUMEL, GEORGE, , ,**

Mailing Address 316 NORTH COUNTRY CLUB DRIVE

City  
LAKE WORTH

State  
FL

Zip Code  
33462-1002

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.74

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

**Transaction ID : SA11A.27712863**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNE

State  
AL

Zip Code  
35967-5145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.05

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

**Transaction ID : SA11A.27712379**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTON

State  
MO

Zip Code  
64012-4207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

**Transaction ID : SA11A.27712995**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

77.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4363 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BORSTAD, DALE, , MR.,**

Mailing Address 14312 ARMSTRONG BLVD N W

City  
RAMSEYState  
MNZip Code  
55303-7281FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LAKE REGION RVSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710606**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711326**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOWE, THOMAS, , ,**

Mailing Address 1924 TARA CT

City  
GREENVILLEState  
NCZip Code  
27858-1692FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711380**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4364 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOWEN, STEPHEN, , ,**

Mailing Address 212 IVY RD

City  
EQUALITYState  
ALZip Code  
36026-2740FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CRADDOCK HEALTH CENTEROccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710842**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMASState  
ORZip Code  
97015-8629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711597**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYNTON, LINDA, A., ,**

Mailing Address 15877 FOUR CORNER RD

City  
PRAIRIE GROVEState  
ARZip Code  
72753-9244FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

463.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710816**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.25



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4365 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRACKEN, KAY, , ,**

Mailing Address 405 HAMVASY

City  
TYLERState  
TXZip Code  
75701-5324FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRACKEN INTERESTOccupation (for Individual)  
OIL AND GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2334.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710995

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRAINARD, LAURA, , ,**

Mailing Address 10105 CRAIG DRIVE

City  
OVERLAND PARKState  
KSZip Code  
66212-3428FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INDEPENDENT CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712552

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROE, SHANNON, , ,**

Mailing Address 1012 N SHORE DR.

City  
PORT ISABELState  
TXZip Code  
78578-4600FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

390.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711362

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

286.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4366 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713019

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City

LITTLE MOUNTAIN

State

SC

Zip Code

29075-0124

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711643

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City

LITTLE MOUNTAIN

State

SC

Zip Code

29075-0124

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711652

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

61.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4367 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711948**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711955**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712260**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4368 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712262**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712763**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, SHARMAN, , MS.,**

Mailing Address 110 CLIFF ST

City  
CORDOVAState  
ALZip Code  
35550-1216FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2819.84

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710948**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4369 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, THOMAS, , ,**

Mailing Address 345 GREEN DOLPHIN DRIVE

City  
PLACIDAState  
FLZip Code  
33946-2238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711576

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRUMBAUGH, PHILIP, C., MR.,**

Mailing Address 108 PHILIP DR

City  
WEST MILTONState  
OHZip Code  
45383-1330FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710545

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRUMBAUGH, PHILIP, C., MR.,**

Mailing Address 108 PHILIP DR

City  
WEST MILTONState  
OHZip Code  
45383-1330FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710559

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4370 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUCHANAN, JAMES, F., MR.,**

Mailing Address 217 ROSEBUD AVE

City  
CORPUS CHRISTIState  
TXZip Code  
78404-1734FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WELDER LESHIN LLPOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712941**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURKE, MARILYN, RISNER, MS.,**

Mailing Address 313 E MAIN ST

City  
DAVISState  
OKZip Code  
73030-1905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE AND REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712113**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUSBY, CHARLOTTE, , ,**

Mailing Address 5110 BEECH ST

City  
BELLAIREState  
TXZip Code  
77401-3327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1628.81

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711053**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4371 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUSING, DON, , ,**

Mailing Address 6919 NUNN ROAD

City  
LAKELANDState  
FLZip Code  
33813-3821FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713372

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BYRD, FAREL, J., MR.,**

Mailing Address 986 SUGAR LANE

City  
COLLIERVILLEState  
TNZip Code  
38017-8645FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FAREL BYRD, CPA, PAOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712417

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CADICAMO, EVELYN, M., MRS.,**

Mailing Address 43577 SERENITY DR

City  
NORTHVILLEState  
MIZip Code  
48167-8932FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713052

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4372 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CADY, WILLIAM, CURTIS, MR.,**

Mailing Address 1426 SOUTH 50TH STREET

City  
KANSAS CITYState  
KSZip Code  
66106-1726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.92

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710843**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMET, MICHELE, , ,**

Mailing Address 4252 W. LEWIS CIRCLE

City  
HURRICANEState  
UTZip Code  
84737-7721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710808**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMET, MICHELE, , ,**

Mailing Address 4252 W. LEWIS CIRCLE

City  
HURRICANEState  
UTZip Code  
84737-7721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712969**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

94.75



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4373 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711154**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711181**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711749**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

42.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4374 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CERNUDA, HERMINIO, L., MR.,**

Mailing Address 5320 SW 5TH TER

City  
CORAL GABLESState  
FLZip Code  
33134-1126FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711825

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CERNUDA, HERMINIO, L., MR.,**

Mailing Address 5320 SW 5TH TER

City  
CORAL GABLESState  
FLZip Code  
33134-1126FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712252

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAMBERLIN, CLINT, , ,**

Mailing Address 1519 5TH AVENUE WEST

City  
WILLISTONState  
NDZip Code  
58801-3903FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

427.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711592

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

22.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4375 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANA, MAGHAR, S., MR.,**

Mailing Address 315 MERCEDES LANE

City  
COLBURNState  
INZip Code  
47905-4566FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.51

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712446**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANDRA, HAROLD, , ,**

Mailing Address 132 OLD LAKE ST

City  
WEST HARRISONState  
NYZip Code  
10604-1611FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.14

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711841**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHERMAK, NANCY, , MRS.,**Mailing Address 7770 BURR ST  
APT 3417City  
SCHERERVILLEState  
INZip Code  
46375-0149FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

729.90

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711916**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4376 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHRISTIAN, CLAUDIA, , ,**

Mailing Address 406 SOUTH 43RD ST.

City  
PHILADELPHIAState  
PAZip Code  
19104-3935FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711949**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHRISTIE, JOHN, , ,**

Mailing Address 1575 HERITAGE DR, STE 107

City  
MCKINNEYState  
TXZip Code  
75069-3395FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

698.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712993**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CIMINO, SHIRLEY, R., MS.,**

Mailing Address 44600 MONTEREY AVE. APT. A219

City  
PALM DESERTState  
CAZip Code  
92260-3368FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710503**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4377 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712752**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLANCY, DAVID, D., MR.,**

Mailing Address 2814 SYLHOWE RD

City  
OAKLANDState  
CAZip Code  
94602-3566FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713287**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLANCY, DAVID, D., MR.,**

Mailing Address 2814 SYLHOWE RD

City  
OAKLANDState  
CAZip Code  
94602-3566FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713288**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4378 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLAPP, WILLIAM, , MR.,**

Mailing Address 1115 COPPER MOON LANE

City  
NORTH LAS VEGASState  
NVZip Code  
89031-1910FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710726**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, RICKEY, , ,**

Mailing Address 2157 N FARM ROAD 197

City  
SPRINGFIELDState  
MOZip Code  
65802-9285FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710722**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COHEN, ALBERT, , ,**

Mailing Address 960 SEASAGE DR.

City  
DELRAY BEACHState  
FLZip Code  
33483-6628FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DELRAY HOSPITALOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1395.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712531**

Amount of Each Receipt this Period

142.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

199.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4379 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLE, ROBERT, , ,**

Mailing Address 150 LAKEVIEW DRIVE

City  
WOODSIDEState  
CAZip Code  
94062-1125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

932.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710507

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLE, ROBERT, , ,**

Mailing Address 150 LAKEVIEW DRIVE

City  
WOODSIDEState  
CAZip Code  
94062-1125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

932.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712629

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINS, CARY, , ,**

Mailing Address 2390 STATE HIGHWAY 17

City  
PHELPSState  
WIZip Code  
54554-9472FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712665

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

699.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4380 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINS, GRETCHEN, ANN, MS.,**

Mailing Address 59 HIGHLAND ST.

City  
HARTFORDState  
CTZip Code  
06119-1324FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CHURCH CHOIR DIR/EVENT PLANNE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713243**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONNOLLY, DONNA, MARIE, MS.,**Mailing Address 6881 IL REGALO CIR  
APT 112City  
NAPLESState  
FLZip Code  
34109-6818FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713094**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711441**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

593.58



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4381 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COPPLE, CLAIRE, , ,**

Mailing Address 2324 BISMARCK AVE

City  
MANTECAState  
CAZip Code  
95337-7841FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710785

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COWHEY, DENNIS, , ,**

Mailing Address 11861 MISTY ARBOR RUN

City  
FORT MYERSState  
FLZip Code  
33913-9417FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712132

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COX, JUNE, , ,**

Mailing Address 159 NTH 4TH AVE

City  
FORSYTHState  
MTZip Code  
59327-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

318.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712475

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4382 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRABTREE, CYNTHIA, , ,**

Mailing Address 13411 FM 807

City  
DALHARTState  
TXZip Code  
79022-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710678

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRABTREE, CYNTHIA, , ,**

Mailing Address 13411 FM 807

City  
DALHARTState  
TXZip Code  
79022-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710679

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRABTREE, CYNTHIA, , ,**

Mailing Address 13411 FM 807

City  
DALHARTState  
TXZip Code  
79022-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

354.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710684

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

74.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4383 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRABTREE, CYNTHIA, , ,**

Mailing Address 13411 FM 807

City  
DALHARTState  
TXZip Code  
79022-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713091**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712211**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712213**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 4384 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712217

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAWFORD, RANDY, , ,**

Mailing Address 6100 SHENANDOAH AVE.

City  
LOS ANGELESState  
CAZip Code  
90056-2021FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711320

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRIDDLE, MARY, , ,**

Mailing Address 37 SUNNY GLEN

City  
ALPINEState  
TXZip Code  
79830-1005FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711025

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

398.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4385 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CROWLEY, DAN, , ,**

Mailing Address 1601 K STREET, NW

City  
WASHINGTONState  
DCZip Code  
20006-1682FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KL GATES LLPOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713193**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CROZIER, MARILYN, , ,**

Mailing Address 11928 FARWELL ROAD

City  
PHILADELPHIAState  
PAZip Code  
19154-3419FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711484**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CUNNINGHAM, JUDITH, , ,**

Mailing Address 5101 N CASA BLANCA DR UNIT 326

City  
PARADISE VALLEYState  
AZZip Code  
85253-6914FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711369**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2562.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4386 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURRY, ROBERT, J., ,**

Mailing Address 1205 ANDTE CIR.

City  
CLAREMOREState  
OKZip Code  
74017-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711461**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAIGLE, WAYNE, E., ,**

Mailing Address 210 SOUTH ST.

City  
BAYTOWNState  
TXZip Code  
77520-3764FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712557**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DALE, JOHN, , ,**

Mailing Address 20 CHATHAM RD

City  
HEWITTState  
NJZip Code  
07421-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RIVERVIEW PAVINGOccupation (for Individual)  
LABORER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712246**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.04

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4387 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DALMAN, RONALD, , ,**

Mailing Address 701 RETREST DRIVE 137

City  
NAPLES

State  
FL

Zip Code  
34110-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.74

Date of Receipt

02 / 22 / 2025

**Transaction ID : SA11A.27710715**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DALMAN, RONALD, , ,**

Mailing Address 701 RETREST DRIVE 137

City  
NAPLES

State  
FL

Zip Code  
34110-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.74

Date of Receipt

02 / 22 / 2025

**Transaction ID : SA11A.27710830**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DANSE, ILENE, , MS.,**

Mailing Address P.O. BOX 830249

City  
RICHARDSON

State  
TX

Zip Code  
75083-0249

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

569.93

Date of Receipt

02 / 22 / 2025

**Transaction ID : SA11A.27711155**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

171.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4388 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DANSE, ILENE, , MS.,**

Mailing Address P.O. BOX 830249

City  
RICHARDSONState  
TXZip Code  
75083-0249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711175**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DANSE, ILENE, , MS.,**

Mailing Address P.O. BOX 830249

City  
RICHARDSONState  
TXZip Code  
75083-0249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711184**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DE MARTINO, VINCENT, R., MR.,**

Mailing Address 4281 AVOCADO AVE

City  
YORBA LINDAState  
CAZip Code  
92886-2572FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ROCKWELLOccupation (for Individual)  
ENGINEERING MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713355**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

195.93



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4389 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEAN, JOHN, , JR.**

Mailing Address P.O. BOX 272

City  
LELANDState  
MSZip Code  
38756-0272FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.66

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711437

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEANE, FREDERICK, R., DR.,**

Mailing Address 3696 COOK VALLEY BLVD SE

City  
GRAND RAPIDSState  
MIZip Code  
49546-8324FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713230

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711478

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.08

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4390 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DEBERARDINIS, RALPH, , ,

Mailing Address 2210 CLEARVIEW LANE

City  
ASTONState  
PAZip Code  
19014-1605FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.91

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02	/	22	/	2025

Transaction ID : SA11A.27713246

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DELUCA, TONI, L., MS.,

Mailing Address 4684 E HEDGES AVE

City  
FRESNOState  
CAZip Code  
93703-4707FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SJC INCOccupation (for Individual)  
COMPTROLLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02	/	22	/	2025

Transaction ID : SA11A.27711411

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DETHMERS, RICHARD, , ,

Mailing Address 10450 THOMAS CREEK RD

City  
RENOState  
NVZip Code  
89511-5450FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.51

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02	/	22	/	2025

Transaction ID : SA11A.27710773

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

144.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4391 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIMMITT, JAN, , ,**

Mailing Address 2517 W AVE K12

City  
LANCASTERState  
CAZip Code  
93536-1102FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710511

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DORRE, JAMES, , ,**

Mailing Address 1206 SPRING VILLA CT

City  
JACKSONVILLEState  
NCZip Code  
28540-3313FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712836

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOVER, BRENDA, , ,**

Mailing Address 28656 DEER RUN ST

City  
MONTGOMERYState  
TXZip Code  
77356-3990FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOVER INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

747.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710616

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

139.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4392 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOVER, BRENDA, , ,**

Mailing Address 28656 DEER RUN ST

City  
MONTGOMERYState  
TXZip Code  
77356-3990FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOVER INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

747.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710623**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOVER, BRENDA, , ,**

Mailing Address 28656 DEER RUN ST

City  
MONTGOMERYState  
TXZip Code  
77356-3990FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DOVER INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

747.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710642**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOWDY, JOHN, , MR., JR.**

Mailing Address 3706 N SHADYCREEK DR.

City  
ARLINGTONState  
TXZip Code  
76013-1017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712160**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

154.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4393 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOWNING, GEORGE, , ,**

Mailing Address 1308 EAST JULIE DRIVE

City  
TEMPEState  
AZZip Code  
85283-3117FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.41

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713179**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOWNING, GINN, , ,**

Mailing Address 18134 LAMSON ROAD

City  
CASTRO VALLEYState  
CAZip Code  
94546-2120FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
COMMERCIAL REAL ESTATE FINAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711493**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUFF, FRANKLIN, DUANE, ,**

Mailing Address 4800 NW FRANCIS DRIVE

City  
SILVERDALEState  
WAZip Code  
98383-9239FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713384**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4394 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUFFY, GERARD, , ,**

Mailing Address 39 BAYBERRY LN

City  
MIDDLETOWNState  
NJZip Code  
07748-1424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711967

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUGAS, ROLAND, , MR.,**

Mailing Address 408 ELYSIAN FIELDS DR

City  
LAFAYETTEState  
LAZip Code  
70508-6058FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712873

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNCAN, ALTA, M., ,**Mailing Address 1001 W LAMBERT RD  
SPC 160City  
LA HABRAState  
CAZip Code  
90631-1522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

246.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710467

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.44

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4395 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DWYER, EDWARD, , MR.,

Mailing Address 10804 GOLF COURSE TERRACE

City  
BOWIEState  
MDZip Code  
20721-2366FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712218

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DYKES, MARY, , ,

Mailing Address 4611 18TH AVE

City  
COLUMBUSState  
GAZip Code  
31904-6027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711758

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EALY, ANNE, H., ,

Mailing Address 4328 E CAPRI AVE  
UNIT 153City  
MESAState  
AZZip Code  
85206-1973FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712537

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

278.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4396 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EALY, ANNE, H., ,**Mailing Address 4328 E CAPRI AVE  
UNIT 153City  
MESAState  
AZZip Code  
85206-1973FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712585

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711066

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712785

Amount of Each Receipt this Period

120.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.62



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4397 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ECKLEY, ROBERT, , ,

Mailing Address 275 GRAND SLAM DR.

City  
BELLEFONTEState  
PAZip Code  
16823-4728FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711049

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EDGINGTON, CAROL, L., ,

Mailing Address 5580 TAMBERLANE CIR.

City  
PALM BCH GDNSState  
FLZip Code  
33418-4107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

819.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710682

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELDER, JEAN, K., MR.,

Mailing Address 462 ENCLAVE CT SE

City  
GRAND RAPIDSState  
MIZip Code  
49546-2169FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JKELDER & ASSOCIATES, INC.Occupation (for Individual)  
CEO/SENIOR PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713222

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

257.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4398 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELLESTAD, BOYD, ALLEN, MR.,**

Mailing Address 30508 SANTA LUNA DR.

City  
RANCHO PALOS VERDEState  
CAZip Code  
90275-6318FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.12

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711891

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMBORGO, MARITESS, , ,**

Mailing Address 62 WATERFORD CIRCLE

City  
NACOGDOCHESState  
TXZip Code  
75965-8730FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.96

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711010

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMBORGO, MARITESS, , ,**

Mailing Address 62 WATERFORD CIRCLE

City  
NACOGDOCHESState  
TXZip Code  
75965-8730FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.96

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713038

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4399 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENGSTROM, ROBERT, , ,**

Mailing Address 1375 WEST FORK DRIVE

City  
LAKE FORESTState  
ILZip Code  
60045-3560FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AEQUAL TECHNOLOGIES LLCOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712725**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EVANS, CARTER, , ,**

Mailing Address 1 PARKLANDS DRIVE

City  
DARIENState  
CTZip Code  
06820-3656FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713004**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EVANS, DONALD, , ,**

Mailing Address 42085 WEST CRIBBAGE ROAD

City  
MARICOPAState  
AZZip Code  
85138-3928FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712083**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

283.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4400 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EVANS, JULIE, A., MS.,**

Mailing Address 420 DESERT AIRE DR. SW

City  
MATTAWAState  
WAZip Code  
99349-1961FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WGEOccupation (for Individual)  
APPLE FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712457

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EVANS, LORETTA, , ,**

Mailing Address 450 N. KROCKS RD/ UNIT 331

City  
ALLENTOWNState  
PAZip Code  
18106-8934FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713211

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FANNIN, SUZAN, , MS.,**

Mailing Address 5903 85TH ST

City  
LUBBOCKState  
TXZip Code  
79424-3602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

451.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711112

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4401 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FINCH, OWEN, , ,**

Mailing Address 5210 CHAMPLAIN BEND ST

City  
HOUSTONState  
TXZip Code  
77056-4206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710563**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FINCH, OWEN, , ,**

Mailing Address 5210 CHAMPLAIN BEND ST

City  
HOUSTONState  
TXZip Code  
77056-4206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710645**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FORSTER, KATHY, , MS.,**

Mailing Address 712 LA MARITE DR

City  
MANCHESTERState  
MOZip Code  
63021-7014FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SSMOccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711405**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4402 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710869**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FULLER, LOUIS, S., ,**

Mailing Address 9170 CHERRY HILL CT

City  
FORT MYERSState  
FLZip Code  
33908-3648FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712790**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FUTCH, JOAN, , ,**

Mailing Address 1206 VOYLE ST.

City  
LUFKINState  
TXZip Code  
75901-1416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712518**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

157.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4403 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAMBLE, DENNY, E., MR., JR.**

Mailing Address P.O. BOX 52389

City  
**SHREVEPORT**

State  
**LA**

Zip Code  
**71135-2389**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**GUEST CARE MANAGEMENT**

Occupation (for Individual)  
**CHAIRMAN**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1244.12**

Date of Receipt

**02 / 22 / 2025**

**Transaction ID : SA11A.27711995**

Amount of Each Receipt this Period

**99.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GASBARRA, FRANCES, , ,**

Mailing Address PO BOX 84

City  
**GOLF**

State  
**IL**

Zip Code  
**60029-0084**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**FORTE INTERNATIONAL TAX**

Occupation (for Individual)  
**DIRECTOR/ OWNER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**324.44**

Date of Receipt

**02 / 22 / 2025**

**Transaction ID : SA11A.27710942**

Amount of Each Receipt this Period

**46.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEROMEL, ALICIA, , ,**

Mailing Address 4429 LINDEWOOD DR

City  
**SWARTZ CREEK**

State  
**MI**

Zip Code  
**48473-8224**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**209.90**

Date of Receipt

**02 / 22 / 2025**

**Transaction ID : SA11A.27712599**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**245.00**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4404 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIBSON, JOYCE, , ,**

Mailing Address 1701 HOPEMAN PARKWAY

City  
WAYNESBOROState  
VAZip Code  
22980-1970FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.40

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713314**

Amount of Each Receipt this Period

4.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILLESPIE, ALLISON, , ,**

Mailing Address 9730 VOYLES LOOP

City  
POLK CITYState  
FLZip Code  
33868-8957FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
SECURITY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712181**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILLISPIE, LURLEAN, G., ,**

Mailing Address 310 BANYON BROOK POINT

City  
ROSWELLState  
GAZip Code  
30076-3672FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710718**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

212.90



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4405 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLICK, LINDA LOU, , ,**

Mailing Address 2485 SUN MANOR, APT B

City  
PARADISE

State  
CA

Zip Code  
95969-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.73

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

**Transaction ID : SA11A.27710710**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOLDMAN, BARBARA, , ,**

Mailing Address 798 N 73RD WEST AVE

City  
TULSA

State  
OK

Zip Code  
74127-5683

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.53

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

**Transaction ID : SA11A.27711806**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOLDMANN, NICHOLAS, , ,**

Mailing Address PO BOX 845

City  
TEMECULA

State  
CA

Zip Code  
92593-0845

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HP COMMUNICATIONS

Occupation (for Individual)  
LINEMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

382.60

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

**Transaction ID : SA11A.27712760**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

162.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4406 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GONZALEZ, JESUS, RAMON, ,**

Mailing Address P O BOX 522494

City  
MIAMIState  
FLZip Code  
33152-2494FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PROPERTY MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710960

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOOD, BRENDA, , ,**

Mailing Address 1213 WARWICK DR.

City

MIAMISBURG

State

OH

Zip Code

45342-3250

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710694

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOOD, BRENDA, , ,**

Mailing Address 1213 WARWICK DR.

City

MIAMISBURG

State

OH

Zip Code

45342-3250

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

399.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710697

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4407 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOOD, BRENDA, , ,

Mailing Address 1213 WARWICK DR.

City  
MIAMISBURGState  
OHZip Code  
45342-3250FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710706

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOOD, BRENDA, , ,

Mailing Address 1213 WARWICK DR.

City  
MIAMISBURGState  
OHZip Code  
45342-3250FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710714

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GORDON, DOROTHY, , ,

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710899

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

23.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4408 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAHAM, JOSEPH, , ,**

Mailing Address 106 LAKEVIEW LANE

City  
HEADLANDState  
ALZip Code  
36345-2202FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712386

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRASEMANN, KARL, , ,**

Mailing Address 719 BRAINTREE LANE

City  
BARTLETTState  
ILZip Code  
60103-4573FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710812

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAY, BETHANY, , ,**

Mailing Address 6332 TROON AVENUE SOUTHWEST

City  
PORT ORCHARDState  
WAZip Code  
98367-7600FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711855

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

208.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4409 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAY, BETHANY, , ,**

Mailing Address 6332 TROON AVENUE SOUTHWEST

City  
PORT ORCHARDState  
WAZip Code  
98367-7600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712221**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712949**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, CALVIN, , ,**

Mailing Address 1601 LEXINGTON RD

City  
PLEASANT HILLState  
MOZip Code  
64080-1123FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LSR7Occupation (for Individual)  
BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711265**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

147.87

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4410 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREENWOOD, KEITH, , ,**

Mailing Address 1250 S SANDBRANCH

City  
MOUNT HOPE

State  
WV

Zip Code  
25880-9068

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
PLUMBER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.56

Date of Receipt

**02** / **22** / **2025**

**Transaction ID : SA11A.27713200**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREGORY, ALAN, W., ,**

Mailing Address 4524 INDIAN CABIN TER

City  
HAMMONTON

State  
NJ

Zip Code  
08037-3915

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

**02** / **22** / **2025**

**Transaction ID : SA11A.27712052**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTS

State  
NY

Zip Code  
10598-2323

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

644.48

Date of Receipt

**02** / **22** / **2025**

**Transaction ID : SA11A.27711961**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

69.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4411 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598-2323FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.48

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

Transaction ID : SA11A.27712026

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598-2323FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.48

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

Transaction ID : SA11A.27712670

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598-2323FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

644.48

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

Transaction ID : SA11A.27712852

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4412 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREMBI, JAMES, , MR.,**

Mailing Address 82 PUTTER DRIVE

City  
PALM COASTState  
FLZip Code  
32164-4700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.97

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711008**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIFFIN, WALTER, W., MR.,**

Mailing Address 5213 HAYNES STERCHI RD.

City  
KNOXVILLEState  
TNZip Code  
37912-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.06

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710482**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIFFIN, WALTER, W., MR.,**

Mailing Address 5213 HAYNES STERCHI RD.

City  
KNOXVILLEState  
TNZip Code  
37912-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

491.06

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710487**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

147.87



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4413 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710763**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713170**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRISSOM, LINDA, , ,**

Mailing Address 1598 LEISURE WORLD

City  
MESAState  
AZZip Code  
85206-2315FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AWRCOccupation (for Individual)  
NURSE PRACTITIONER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

351.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713054**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4414 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROSS, ELLEN, , ,**

Mailing Address 3433 IVYLINK PLACE

City  
LYNCHBURGState  
VAZip Code  
24503-3003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.20

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710807**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROVER, KAREN, , ,**

Mailing Address 925 COLORADO ST

City  
MARSEILLESState  
ILZip Code  
61341-1241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.22

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712440**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRUNNAH, S, THOMAS, MR.,**

Mailing Address W6310 HAMMANN ROAD

City  
PLYMOUTHState  
WIZip Code  
53073-2713FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713354**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

138.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4415 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HACKL, MARK, , ,**

Mailing Address 485 HICKORY NUT AVE

City  
OLDSMARState  
FLZip Code  
34677-2016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712069

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAISLER, SHIRLEY, A., MS.,**

Mailing Address 1200 COWLING RD

City  
SANGERState  
TXZip Code  
76266-9084FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712779

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HALSTEAD, WARREN, , ,**

Mailing Address 98 ZABALA ROAD

City  
SALINASState  
CAZip Code  
93908-9704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711607

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4416 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAND, THOMAS, , ,**

Mailing Address 13828 N LOBELIA WAY

City  
ORO VALLEYState  
AZZip Code  
85755-7073FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712753**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSEN, JUDY, , MRS.,**

Mailing Address P.O.BOX 4213

City  
SHOW LOWState  
AZZip Code  
85902-4213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.47

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711458**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRAH, TONY, , ,**

Mailing Address 355 BOXINGTON WAY

City  
SPARKSState  
NVZip Code  
89434-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2456.46

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712291**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

223.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4417 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEATHMAN, CHRISTINE, , ,**

Mailing Address 1119 SOUTH SAGE CREEK COURT

City  
HEBER CITYState  
UTZip Code  
84032-4169FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLYMED PLUSOccupation (for Individual)  
FORMULATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1144.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712255**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEEYER, PEGGY, , ,**

Mailing Address 443 CARIBBEAN DR. E

City  
SUMMERLAND KEYState  
FLZip Code  
33042-4845FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712429**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEINRICHS, SARAH, J., MRS.,**

Mailing Address 6004 AMBER OAKS AVE

City  
BAKERSFIELDState  
CAZip Code  
93306-7008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

324.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710803**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4418 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEINRICH, SARAH, J., MRS.,**

Mailing Address 6004 AMBER OAKS AVE

City  
BAKERSFIELDState  
CAZip Code  
93306-7008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.54

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710806**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEINRICH, SARAH, J., MRS.,**

Mailing Address 6004 AMBER OAKS AVE

City  
BAKERSFIELDState  
CAZip Code  
93306-7008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.54

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710819**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEMBREE, WILLIAM, L., MR.,**

Mailing Address 2626 BLUE MOUNTAIN TRL

City  
LYONSState  
COZip Code  
80540-8461FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712784**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4419 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENRY, JAMES, R., MR.,**

Mailing Address 2608 COLLEGE DRIVE

City  
VICTORIAState  
TXZip Code  
77901-4482FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE AND SECURITIES SALE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712587

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENTHORN, JIM, , ,**

Mailing Address 242 COUNTY HIGHWAY 183 NORTH

City  
DEFUNIAK SPRINGSState  
FLZip Code  
32433-4394FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711259

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENTHORN, JIM, , ,**

Mailing Address 242 COUNTY HIGHWAY 183 NORTH

City  
DEFUNIAK SPRINGSState  
FLZip Code  
32433-4394FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711831

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

47.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4420 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERRING, DAVID, B., MR.,**

Mailing Address 8728 BALLY BUNION RD

City  
PORT SAINT LUCIEState  
FLZip Code  
34986-3086FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ADMIRAL MGTOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710490**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERROLD, BARBARA, J., MRS.,**

Mailing Address 3738 MARSBELLA PL

City  
KALAMAZOOState  
MIZip Code  
49006-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
K O PRODUCTSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710911**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLMAN, PATRICK, , ,**

Mailing Address 34 HUNTERSTOWN ROAD

City  
GERMANTOWNState  
NYZip Code  
12526-5604FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

522.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711575**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.21



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4421 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIPP, CHARLES, R., ,**

Mailing Address 4226 ROBERTS RD

City  
KERSHAWState  
SCZip Code  
29067-8761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.99

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713197**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOISINGTON, JACKIE, , ,**

Mailing Address 2625 W RELATION ST

City  
SAFFORDState  
AZZip Code  
85546-4047FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOOPNER ENERGYOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.74

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712593**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOKE, TERRY, , ,**

Mailing Address 811 ELIZABETH ROAD

City  
SAN ANTONIOState  
TXZip Code  
78209-6138FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710501**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

99.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4422 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOKE, TERRY, , ,**

Mailing Address 811 ELIZABETH ROAD

City  
SAN ANTONIOState  
TXZip Code  
78209-6138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711115**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLAND, TERRY, , ,**

Mailing Address 12880 WILLOW BAY DR.

City  
OKLAHOMA CITYState  
OKZip Code  
73165-3201FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711919**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLLOBAUGH, JOHN, , ,**

Mailing Address 810 EAST ST

City  
ALTOONAState  
PAZip Code  
16602-5451FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

369.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711061**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4423 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLLOBAUGH, JOHN, , ,**

Mailing Address 810 EAST ST

City  
ALTOONAState  
PAZip Code  
16602-5451FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711063

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLOBAUGH, JOHN, , ,**

Mailing Address 810 EAST ST

City  
ALTOONAState  
PAZip Code  
16602-5451FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711069

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLLOBAUGH, JOHN, , ,**

Mailing Address 810 EAST ST

City  
ALTOONAState  
PAZip Code  
16602-5451FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

369.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711071

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.42

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4424 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLLOBAUGH, JOHN, , ,**

Mailing Address 810 EAST ST

City  
ALTOONAState  
PAZip Code  
16602-5451FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711073**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLTEN, JAMES, J., MR.,**

Mailing Address 4003 CHESTNUT OAK DR

City  
SMITHTONState  
ILZip Code  
62285-3741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1366.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711476**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLTEN, JAMES, J., MR.,**

Mailing Address 4003 CHESTNUT OAK DR

City  
SMITHTONState  
ILZip Code  
62285-3741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1366.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712679**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4425 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOOPER, CHARLES, I., MR.,**

Mailing Address 11242 CLINTON BAR RD

City  
PINE GROVEState  
CAZip Code  
95665-9619FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PROVIDER HEALTHCAREOccupation (for Individual)  
HOOPER PROPERTIES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712869**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712175**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711583**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4426 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUGHES, MARY ANNE, , ,**

Mailing Address 35803 CORNELL DR

City  
YUCAIPAState  
CAZip Code  
92399-4047FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.16

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712131**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUNT, SUSAN, , ,**

Mailing Address 522 N CANADIAN TER

City  
MUSTANGState  
OKZip Code  
73064-6105FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.08

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713323**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUTSON, D, RUTH, ,**

Mailing Address 509 CRYSTAL SPRINGS CIRCLE

City  
JOHNSON CITYState  
TNZip Code  
37615-2356FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.66

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712884**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4427 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IVERS, DONALD, , MR.,**

Mailing Address 1511 PAUL SPRING PARKWAY

City  
ALEXANDRIAState  
VAZip Code  
22308-1143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

723.10

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712007**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACKSON, KEITH, , ,**

Mailing Address 11527 EAST COCHISE DRIVE

City  
SCOTTSDALEState  
AZZip Code  
85259-4904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ON SEMICONDUCTOROccupation (for Individual)  
SEMICONDUCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713340**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACOBSON, RONI, , ,**

Mailing Address 139 N COUNTY RD

City  
PALM BEACHState  
FLZip Code  
33480-3908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.24

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711234**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

228.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4428 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711415

Amount of Each Receipt this Period

23.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOBLIN, NANCY, , ,**

Mailing Address 19540 SANDRIDGE WAY

City  
LEESBURGState  
VAZip Code  
20176-8286FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710448

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOBLIN, NANCY, , ,**

Mailing Address 19540 SANDRIDGE WAY

City  
LEESBURGState  
VAZip Code  
20176-8286FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710906

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.35



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4429 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, CRAIG, , ,**Mailing Address 2995 WOODSIDE RD  
SUITE 400-505City  
REDWOOD CITYState  
CAZip Code  
94062-2432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JMPOccupation (for Individual)  
FINANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711640**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSTON, DAVID, R., MR.,**

Mailing Address 341 BLOCK ST

City  
FRANKENMUTHState  
MIZip Code  
48734-1155FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713107**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, DOYLE, , ,**

Mailing Address 11648 CAMINITO CORRIENTE

City  
SAN DIEGOState  
CAZip Code  
92128-4540FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FAMILY PHYSICIAN M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

346.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711086**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

256.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4430 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, CHARLES, , ,**

Mailing Address 4 LOS ARBOLES CT.

City  
DALLASState  
TXZip Code  
75230-3052FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1486.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711029

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, FRANK, , , III**

Mailing Address 457 AVONDALE DR.

City  
BRANSONState  
MOZip Code  
65616-3485FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711486

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713113

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

219.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4431 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, RICKY, , ,**

Mailing Address 89 RUTH STREET

City  
HEALDTONState  
OKZip Code  
73438-1408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711667

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JORDAN, KERRY, , ,**

Mailing Address 4537 CHAUMONT TRL

City  
ARLINGTONState  
TXZip Code  
76013-8341FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711448

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JUEL, NORMAN, , ,**

Mailing Address 1620 W 2ND STREET LOT 34

City  
ROCK SPRINGSState  
WYZip Code  
82901-7662FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

536.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712238

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

231.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4432 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAIAFAS, ANDREW, , ,**

Mailing Address 200 BISCQYNE BOULEVARD WAY APT 530

City  
MIAMIState  
FLZip Code  
33131-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MARATHON AIRLINESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

876.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713308**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KARASIUK, KEN, , ,**

Mailing Address 5085 WAGNER WAY

City  
OAK PARKState  
CAZip Code  
91377-4706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711734**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KASTEN, RANDY, , ,**

Mailing Address 112 LOHAVEN DR. APT. 102

City  
CHARLESTONState  
SCZip Code  
29414-6047FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PRIVATE BAR SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712455**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

260.26

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4433 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KEATON, MARGY, , MS.,

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710587

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KENDALL, GAIL, , ,

Mailing Address P.O. BOX 2706

City  
RANCHO SANTA FEState  
CAZip Code  
92067-2706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712547

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KENNEDY, MARY, , ,

Mailing Address 1616 MAPLE AVENUE

City  
NOBLESVILLEState  
INZip Code  
46060-3014FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711327

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

116.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4434 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KENNEDY, MARY, , ,**

Mailing Address 1616 MAPLE AVENUE

City  
NOBLESVILLEState  
INZip Code  
46060-3014FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713060**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIELY, SUSAN, , ,**

Mailing Address 5500 E PEAKVIEW

City  
LITTLETONState  
COZip Code  
80121-3539FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712323**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, JACOB, , ,**

Mailing Address 1024 HEATHERFIELD LANE

City  
GLENVIEWState  
ILZip Code  
60025-3331FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HMD TRUCKINGOccupation (for Individual)  
SEMI TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712471**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

239.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4435 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOONTZ, LINDA, , ,**

Mailing Address 155 PARKLAND DR

City  
SALISBURYState  
NCZip Code  
28146-8205FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710825

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRAUSE, CAROLYN, , ,**Mailing Address 2100 CIRCLE DR.  
APT 221City  
SCOTTSBLUFFState  
NEZip Code  
69361-1778FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER/FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712426

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAI, SUE, , ,**

Mailing Address 157 HIDDEN ROAD

City  
ANDOVERState  
MAZip Code  
01810-4933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

977.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712031

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

101.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4436 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LALONDE, RICHARD , , ,**

Mailing Address 3332 NW 47TH CT

City  
OCALAState  
FLZip Code  
34482-8322FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

938.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710818

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAMB, FRANK, , ,**

Mailing Address 2346WEST COLLEGE AVE

City

SANTA ROSA

State

CA

Zip Code

95401-4951

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711004

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAMPING, DOUG, R., MR.,**

Mailing Address 1433 SOUTH 35 EAST

City

FARMINGTON

State

UT

Zip Code

84025-2004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UDCOccupation (for Individual)  
CO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

494.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712870

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

112.47



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4437 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANDSAW, RUTH, W., ,**

Mailing Address 14481 DAWN HILL RD.

City  
SILOAM SPRINGSState  
ARZip Code  
72761-8249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.48

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712487**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANE, ANDREA, , ,**

Mailing Address 31345 PICKFORD AVENUE

City  
LIVONIAState  
MIZip Code  
48152-4607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.50

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712182**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LARIS, RUDY, , ,**

Mailing Address 111 VACHERIE ST

City  
LOCKPORTState  
LAZip Code  
70374-2534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

412.30

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712735**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

205.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4438 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LARUE, PATRICIA, , ,**

Mailing Address 3137-B GOLDEN YEARS HOMESTEAD DR

City  
NEW HAVENState  
INZip Code  
46774-3003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710713**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LARUE, PATRICIA, , ,**

Mailing Address 3137-B GOLDEN YEARS HOMESTEAD DR

City  
NEW HAVENState  
INZip Code  
46774-3003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712727**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAVERDIERE, RAYMOND, , ,**

Mailing Address 1517 CAMDEN WOODS TERRACE

City  
SAINT CLOUDState  
MNZip Code  
56301-9662FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710471**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.42

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4439 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEAHY, PATRICIA, , ,**

Mailing Address 750 WETMORE HEIGHTS

City  
COLORADO SPRINGSState  
COZip Code  
80906-8608FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713259

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEAHY, PATRICIA, , ,**

Mailing Address 750 WETMORE HEIGHTS

City  
COLORADO SPRINGSState  
COZip Code  
80906-8608FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713260

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEAHY, PATRICIA, , ,**

Mailing Address 750 WETMORE HEIGHTS

City  
COLORADO SPRINGSState  
COZip Code  
80906-8608FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

382.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713261

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

101.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4440 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEAHY, PATRICIA, , ,**

Mailing Address 750 WETMORE HEIGHTS

City  
COLORADO SPRINGSState  
COZip Code  
80906-8608FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713262

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEAHY, PATRICIA, , ,**

Mailing Address 750 WETMORE HEIGHTS

City  
COLORADO SPRINGSState  
COZip Code  
80906-8608FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713263

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEAHY, PATRICIA, , ,**

Mailing Address 750 WETMORE HEIGHTS

City  
COLORADO SPRINGSState  
COZip Code  
80906-8608FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

382.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713264

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4441 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEAHY, PATRICIA, , ,**

Mailing Address 750 WETMORE HEIGHTS

City  
COLORADO SPRINGSState  
COZip Code  
80906-8608FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.45

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713265**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEAHY, PATRICIA, , ,**

Mailing Address 750 WETMORE HEIGHTS

City  
COLORADO SPRINGSState  
COZip Code  
80906-8608FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.45

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713267**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LELEUX, DAVID, , ,**

Mailing Address 3 HEATHERSTONE DR.

City  
LAFAYETTEState  
LAZip Code  
70508-4913FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

ENGINEER

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

276.25

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711057**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4442 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LELEUX, DAVID, , ,**

Mailing Address 3 HEATHERSTONE DR.

City  
LAFAYETTEState  
LAZip Code  
70508-4913FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENGINEEROccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711759

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711079

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712239

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

184.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4443 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713321**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEWAKOWSKI, THOMAS, , ,**

Mailing Address 10878 CHANNELSIDE DR

City  
GULFPORTState  
MSZip Code  
39503-6066FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RED SEA GLOBALOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713367**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

967.82

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711565**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.90



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4444 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINDSEY, RICHARD, , ,**

Mailing Address 1175 RICHMOND CT

City  
MOBILEState  
ALZip Code  
36695-3558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LINDSEY & WALDOOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713043**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LINDSEY, TOMMY, , MR.,**

Mailing Address 11222 LONG BRANCH DR.

City  
AUSTINState  
TXZip Code  
78736-6505FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712319**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LITTLE, CHARLES, E., ,**

Mailing Address 2373 LEDGEWOOD DR

City  
COLORADO SPRINGSState  
COZip Code  
80921-7010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712947**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4445 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUDEMA, RONALD, , ,**

Mailing Address 6325 143RD AVE

City  
HOLLANDState  
MIZip Code  
49423-9748FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711236

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUTSCHG, VIVIAN, , MRS.,**

Mailing Address 2400 MAPLE ST.

City  
CHADRONState  
NEZip Code  
69337-9369FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711439

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LYONS, DOTTIE, , MRS.,**

Mailing Address 914 FAIRWAY VISTA DR.

City  
SANTA MARIAState  
CAZip Code  
93455-1520FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712739

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

146.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4446 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACDONALD, CARROLL, , ,**

Mailing Address 33575 N DOVE LAKES DR

City  
CAVE CREEKState  
AZZip Code  
85331-4102FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712948**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACKENZIE, SCOTT, , ,**

Mailing Address 296 PLEASANT STREET

City  
PEMBROKEState  
MAZip Code  
02359-2805FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DTM PACKAGING LLCOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712915**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MADDOCKS, WILLIAM, , ,**

Mailing Address PO BOX 908

City  
SCHERERVILLEState  
INZip Code  
46375-0908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

541.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711440**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

232.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4447 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MADER, PATRICIA, M., MRS.,**

Mailing Address 1710 HUDSON CIR

City  
GRAND ISLANDState  
NEZip Code  
68801-7473FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.11

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713364**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAKENS, DIANA, , ,**

Mailing Address 3103 CENTER POINT RD

City  
FREDERICKSBURGState  
TXZip Code  
78624-8133FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.31

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712646**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAPLES, KATHY, , ,**

Mailing Address P O BOX 994

City  
GRAND ISLEState  
LAZip Code  
70358-0994FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

488.67

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712070**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4448 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARKANDAYA, MANJUNATH, , ,**

Mailing Address 560 WESTMINSTER CIR

City  
GREENVILLEState  
NCZip Code  
27858-9600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VIDANT MEDICAL CENTEROccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712632**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, FRED, , ,**

Mailing Address 9146 N 15TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.36

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711794**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, FRED, , ,**

Mailing Address 9146 N 15TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

354.36

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711857**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.44

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4449 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MARTIN, FRED, , ,

Mailing Address 9146 N 15TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711866

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARTIN, MICHAEL, , MR.,

Mailing Address 3529 CHEDDINGTON LN

City  
LEXINGTONState  
KYZip Code  
40502-3038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712697

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARTIN, SHIRLEY, , ,

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

412.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711062

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

43.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4450 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712481**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASSAD, MARCUS, J., MR.,**

Mailing Address 8 DEERHURST

City  
SAN ANTONIOState  
TXZip Code  
78218-6028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710495**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASSAD, MARCUS, J., MR.,**

Mailing Address 8 DEERHURST

City  
SAN ANTONIOState  
TXZip Code  
78218-6028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

502.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710824**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4451 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASTERS, BARBARA, , ,**

Mailing Address 3405 W 23 STREET

City  
GREELEYState  
COZip Code  
80634-7503FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NCMC -HOSPITALOccupation (for Individual)  
PBX-OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712889**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASTERS, CARLTON, , ,**

Mailing Address 2127 BRICKELL AVENUE

City  
MIAMIState  
FLZip Code  
33129-2100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GOODWORKS INTERNATIONALOccupation (for Individual)  
DIPLOMAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711263**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATHEWS, TIMOTHY, , ,**

Mailing Address 388 PALOMARES AVENUE

City  
VENTURAState  
CAZip Code  
93003-1737FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

727.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711782**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

197.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4452 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATTOX, JERRY, , ,**

Mailing Address P.O. BOX 752

City  
GILCHRISTState  
ORZip Code  
97737-0752FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.04

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711994**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAURO, PEGGY, , ,**

Mailing Address 23329 HAPPY VALLEY DRIVE

City  
SANTA CLARITAState  
CAZip Code  
91321-2640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712233**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCLLENATHAN, STEPHEN, , ,**

Mailing Address 1423 HERKIMER STEET

City  
HOUSTONState  
TXZip Code  
77008-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.50

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710832**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

218.62



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4453 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCDONNOLD, MUCKLEROY, , , JR.**

Mailing Address 1609 STANOLIND AVENUE

City  
MIDLANDState  
TXZip Code  
79705-8652FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712190

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCGRAW, MICHAEL, , ,**

Mailing Address 5305 SUMTER LANE

City  
SPRINGFIELDState  
ILZip Code  
62711-7415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712247

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCHANAY, REX, , ,**

Mailing Address P.O. BOX 87

City  
HAPPYState  
TXZip Code  
79042-0087FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENBRIDGEOccupation (for Individual)  
CONSTRUCTION MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

286.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712006

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

191.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4454 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCKENZIE, ED, , ,**

Mailing Address 334 LOS PRADOS DR.

City  
SAFETY HARBORState  
FLZip Code  
34695-3338FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712479**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCKINNEY, JOHN, A., ,**

Mailing Address 2430 E BETHEL DR.

City  
ANAHEIMState  
CAZip Code  
92806-4705FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712352**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCMULLEN, TIMOTHY, , ,**

Mailing Address 17 BAIER DR.

City  
ROCHESTERState  
NYZip Code  
14606-5311FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710739**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4455 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MELCHER, STEPHEN, , ,**

Mailing Address 2013 OKMULGEE LN

City  
CROSSVILLEState  
TNZip Code  
38572-3439FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710500**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. METZGER, AGNES, , ,**Mailing Address 888 PARK AVENUE  
2CCity  
NEW YORKState  
NYZip Code  
10075-0282FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1259.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713224**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILES, GERALD, , ,**

Mailing Address P.O. BOX 9297

City  
CHARLESTONState  
WVZip Code  
25309-0297FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712972**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 4456 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, ANNE, , ,**

Mailing Address 6 RONNA RD

City  
GLOUCESTERState  
MAZip Code  
01930-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1006.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711356

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, CLIFFORD, , ,**

Mailing Address 332 BERRYSBURG RD

City  
MILLERSBURGState  
PAZip Code  
17061-1401FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711546

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, LARRY, , ,**

Mailing Address 1235 ROSEDALE DR.

City  
MANSFIELDState  
OHZip Code  
44906-3534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
METRONOME MUSICOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712837

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4457 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712685**

Amount of Each Receipt this Period

1.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELLState  
NMZip Code  
88201-8659FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.16

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711664**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELLState  
NMZip Code  
88201-8659FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.16

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712427**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4458 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MINWALLA, DARAYUS, , ,**Mailing Address 150 WEST END AVENUE  
9FCity  
NEW YORKState  
NYZip Code  
10023-5713FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713383**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIXON, DWIGHT, , ,**

Mailing Address 1324 ATHENS ROAD

City  
CRAWFORDState  
GAZip Code  
30630-2516FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713069**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOMARY, NED, , ,**

Mailing Address 3412 THE STRAND

City  
MANHATTAN BEACHState  
CAZip Code  
90266-3350FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712463**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4459 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORASKI, ROBERT, L., ,**

Mailing Address 1565 LONG CREEK RD

City  
GREENEVILLEState  
TNZip Code  
37743-8259FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

998.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713036**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORGAN, DAVID, G., ,**Mailing Address 4412 ISLAND PLACE  
104City  
ANNANDALEState  
VAZip Code  
22003-4885FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712454**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORGAN, VICTORIA, , ,**

Mailing Address 19416 E NORA AVE

City  
LIBERTY LAKEState  
WAZip Code  
99016-5162FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711311**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

254.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4460 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORRIS, GEORGE, S., MR.,**

Mailing Address P.O. BOX 3698

City  
PINETOPState  
AZZip Code  
85935-3698FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.64

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711504**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORRICAL, PATRICIA, K., ,**

Mailing Address 5682 COUNTRY LAKES DR

City  
SARASOTAState  
FLZip Code  
34243-3811FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.84

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712810**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRIS, STEVEN, , ,**

Mailing Address 7007 B AND K RANCH RD

City  
GEORGETOWNState  
TNZip Code  
37336-4588FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.09

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711600**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.62



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4461 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORRIS, STEVEN, , ,**

Mailing Address 7007 B AND K RANCH RD

City  
GEORGETOWNState  
TNZip Code  
37336-4588FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.09

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711604**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOUAT, NANCY, M., MS.,**

Mailing Address 29242 HIGHWAY 127

City  
GREEN RIDGEState  
MOZip Code  
65332-2303FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.48

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711982**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUELLER, BARBARA, , ,**

Mailing Address 8020 SAILBOAT KEY BLVD S, APT 305

City  
SAINT PETERSBURGState  
FLZip Code  
33707-4415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712297**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

229.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4462 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUFFERI, SAMUEL, C., MR.,**

Mailing Address 6421 MILL RD

City  
EGG HARBOR TWPState  
NJZip Code  
08234-4923FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.50

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710780**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MULHORN, SHIRLEY, , MS.,**

Mailing Address 875 TEMPLE RD.

City  
CLANTONState  
ALZip Code  
35045-8430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

617.56

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710789**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MULHORN, SHIRLEY, , MS.,**

Mailing Address 875 TEMPLE RD.

City  
CLANTONState  
ALZip Code  
35045-8430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

617.56

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710792**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4463 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, JAMES, , ,**

Mailing Address 135 SUNSHINE DR.

City  
PACIFICAState  
CAZip Code  
94044-1125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712460**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MUSICK, PEGGY, , ,**

Mailing Address 4804 YAUPON CIR

City  
MYRTLE BEACHState  
SCZip Code  
29575-4508FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713245**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEAL, LONNIE, DAVID, ,**

Mailing Address 7128 NORTH 63DRIVE

City  
GLENDALEState  
AZZip Code  
85301-2385FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711763**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.84

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4464 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, EDWARD, , ,**

Mailing Address 8830 MCAVOY DR.

City  
HOUSTONState  
TXZip Code  
77074-7310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.08

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712764**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, J., SCOTT, ,**

Mailing Address 5540 WEST EL PASO AVENUE

City  
FRESNOState  
CAZip Code  
93722-2788FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.30

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711307**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, PATRICIA, , ,**

Mailing Address 138 SOUTH SALEM DR.

City  
MCDONOUGHState  
GAZip Code  
30253-4768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

569.92

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710731**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4465 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, PATRICIA, , ,**

Mailing Address 138 SOUTH SALEM DR.

City  
MCDONOUGHState  
GAZip Code  
30253-4768FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710737

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, SANDRA, , ,**

Mailing Address 1903 FOREST HILLS

City  
MCKINNEYState  
TXZip Code  
75072-4015FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712237

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEWELL, LINDA, , ,**

Mailing Address 4324 SUMMER STAR LANE

City  
FORT WORTHState  
TXZip Code  
76244-4934FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

574.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712104

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4466 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NIELSEN, EARL, , ,**

Mailing Address 10 LIDGERWOOD PLACE

City  
MORRISTOWNState  
NJZip Code  
07960-5736FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MORRISTOWN MEDICAL CENTEROccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712963**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIENKE, STEVE, , ,**

Mailing Address 1374 N RIDGE RD

City  
PECKState  
KSZip Code  
67120-9039FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711374**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NOLTE, RICK, , ,**

Mailing Address 4084 THE FENWAY

City  
MULBERRYState  
FLZip Code  
33860-8618FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712157**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

157.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4467 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NORTH, WALTER, , ,**

Mailing Address 8552 COBBLESTONE DR.

City  
FORT PIERCEState  
FLZip Code  
34945-5701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712147**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O' BRIEN, DENNIS, , ,**

Mailing Address 6720 YORK ROAD

City  
CLEVELANDState  
OHZip Code  
44130-4568FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UPSOccupation (for Individual)  
MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711914**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'ROURKE, DON, , , SR.**

Mailing Address 909 ROPER DRIVE

City  
SCOTTState  
LAZip Code  
70583-4701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712722**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4468 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OKEEFE, JAMES, , ,**

Mailing Address 3636 S LELAND ST

City  
SAN PEDROState  
CAZip Code  
90731-6426FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711733

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OKEEFE, JAMES, , ,**

Mailing Address 3636 S LELAND ST

City  
SAN PEDROState  
CAZip Code  
90731-6426FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711832

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSTERMAN, CINDY, , ,**

Mailing Address 1640 SPRINGHILL RD

City  
AUBREYState  
TXZip Code  
76227-3919FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711430

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.98



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4469 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OWEN, WILLIAM, E., MR.,**

Mailing Address 481 S KEELER WOODS DR NW

City  
MARIETTAState  
GAZip Code  
30064-2027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710940

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAGE, CHERYL, L., MS.,**

Mailing Address 13 PIPESTONE DR.

City  
MIAMISBURGState  
OHZip Code  
45342-6603FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MIAMI VALLEY HOSPITALOccupation (for Individual)  
NURSE/RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712122

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAGE, SUSAN, , ,**Mailing Address 2414 FRONT ST  
#22City  
SAN DIEGOState  
CAZip Code  
92101-1439FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711045

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

189.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4470 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PANDINA, ANTHONY, , ,**

Mailing Address 20413 NE 161ST ST

City  
BRUSH PRAIRIEState  
WAZip Code  
98606-6707FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711716**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAPPAS, JAMES, , ,**

Mailing Address 6202 APPIAN WAY

City  
RIVERSIDEState  
CAZip Code  
92506-4555FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711590**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKER, BRUCE, E., ,**

Mailing Address 320 IVYWOOD LANE

City  
NAPLESState  
FLZip Code  
34112-7239FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711872**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4471 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARKER, BRUCE, E., ,**

Mailing Address 320 IVYWOOD LANE

City  
NAPLESState  
FLZip Code  
34112-7239FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712464**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PATTON, JOHN, C., ,**

Mailing Address 4414 TOWN AND COUNTRY DR.

City  
CHARLOTTEState  
NCZip Code  
28226-6311FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712824**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAULSON, KATHLEEN, , ,**

Mailing Address 7725 E SANDALWOOD

City  
SCOTTSDALEState  
AZZip Code  
85250-7732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713332**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

209.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4472 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711159

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711162

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711163

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4473 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711165**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711166**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711173**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

101.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4474 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713205**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713206**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713207**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

58.71

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4475 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713208

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713210

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PEARSON, CLYDE, , ,**

Mailing Address 1312 FORBES DRIVE

City  
HUNTSVILLEState  
ALZip Code  
35802-1208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711452

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

329.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4476 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PECORA, SANDRA, J., MRS.,**

Mailing Address 20 EDGEWATER CT

City  
WAKEMANState  
OHZip Code  
44889-9082FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711393**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PECORA, SANDRA, J., MRS.,**

Mailing Address 20 EDGEWATER CT

City  
WAKEMANState  
OHZip Code  
44889-9082FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713158**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERMAN, DON, , ,**

Mailing Address P.O. BOX 77

City  
ISLETONState  
CAZip Code  
95641-0077FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TRCOccupation (for Individual)  
CONSTRUCTION MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713002**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4477 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETERMAN, DON, , ,**

Mailing Address P.O. BOX 77

City  
ISLETONState  
CAZip Code  
95641-0077FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TRCOccupation (for Individual)  
CONSTRUCTION MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713007**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETERSON, NORMA, , ,**

Mailing Address 1526 DEDHAM LANE

City  
SCHAUMBURGState  
ILZip Code  
60193-2527FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711278**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORGState  
VAZip Code  
23860-8229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

388.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710631**

Amount of Each Receipt this Period

12.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4478 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORGState  
VAZip Code  
23860-8229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710905

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712923

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIRTLE, BOB, , ,**

Mailing Address 7601 HAMNER LANE

City  
PLANOState  
TXZip Code  
75024-3429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712638

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

213.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4479 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PLENDERLEITH, GRACE, , ,**

Mailing Address 111 FALCON RIDGE DRIVE

City  
IRWINState  
PAZip Code  
15642-3094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713204**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POLZIN, RICHARD, , MR.,**

Mailing Address 235 WILLIS RD

City  
SUDBURYState  
MAZip Code  
01776-1390FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711241**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POTEET, MARY, , ,**

Mailing Address 3636 GREENACRES PLACE DR.

APT 43

City  
BOSSIER CITYState  
LAZip Code  
71111-2147FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

402.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710522**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

207.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4480 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711203

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711207

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711209

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4481 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PUDANS, JOHN, P., ,**

Mailing Address 589 18TH AVE NW

City  
NAPLESState  
FLZip Code  
34120-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711220

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAINEY, DAVID, L., MR.,**

Mailing Address 1791 RAMPART DR.

City  
ALEXANDRIAState  
VAZip Code  
22308-1655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711218

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RANALLO, JINGER, , ,**

Mailing Address 813 LEEDS STREET

City  
BAKERSFIELDState  
CAZip Code  
93311-1144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

419.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710733

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

137.42

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4482 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RANALLO, JINGER, , ,**

Mailing Address 813 LEEDS STREET

City  
BAKERSFIELD

State  
CA

Zip Code  
93311-1144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.23

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

Transaction ID : SA11A.27710777

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAVENSCROFT, ROBERT, , ,**

Mailing Address 8445 E HARTFORD DR.

City  
SCOTTSDALE

State  
AZ

Zip Code  
85255-5450

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.16

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

Transaction ID : SA11A.27711551

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAVENSCROFT, ROBERT, , ,**

Mailing Address 8445 E HARTFORD DR.

City  
SCOTTSDALE

State  
AZ

Zip Code  
85255-5450

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

519.16

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

Transaction ID : SA11A.27713349

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

138.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4483 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAYBORN, KENNETH, , ,**

Mailing Address 507 KYLE LANE NW

City  
CLEVELANDState  
TNZip Code  
37312-6439FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1059.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713375

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAYBORN, KENNETH, , ,**

Mailing Address 507 KYLE LANE NW

City  
CLEVELANDState  
TNZip Code  
37312-6439FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1059.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713376

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAYBORN, KENNETH, , ,**

Mailing Address 507 KYLE LANE NW

City  
CLEVELANDState  
TNZip Code  
37312-6439FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1059.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27713377

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

119.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4484 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. READ, JEAN, , ,**

Mailing Address 367 RED #ROCK ROAD

City  
WICHITA FALLSState  
TXZip Code  
76305-2817FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711017

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. READ, JEAN, , ,**

Mailing Address 367 RED #ROCK ROAD

City  
WICHITA FALLSState  
TXZip Code  
76305-2817FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711534

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REAMS, GLORIA, , ,**

Mailing Address 9060 SILVER STAR AVE

City  
DESERT HOT SPRINGSState  
CAZip Code  
92240-7723FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710903

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

221.25



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4485 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RECUPERO, RITA, , ,**

Mailing Address 14000 CAROLINES COVE #101A

City  
ORMOND BEACHState  
FLZip Code  
32174-3188FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710963**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RECUPERO, RITA, , ,**

Mailing Address 14000 CAROLINES COVE #101A

City  
ORMOND BEACHState  
FLZip Code  
32174-3188FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711033**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REEDER, KENT, , ,**

Mailing Address 3899 ORCHARD LN

City  
BEULAHState  
MIZip Code  
49617-9675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REEDERREN-OOccupation (for Individual)  
SELF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712099**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

147.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4486 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RHODES, ZOFIA, , ,**

Mailing Address P O BOX 2423

City  
BRYSON CITYState  
NCZip Code  
28713-2423FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710534

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RHODES, ZOFIA, , ,**

Mailing Address P O BOX 2423

City  
BRYSON CITYState  
NCZip Code  
28713-2423FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710538

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RHODES, ZOFIA, , ,**

Mailing Address P O BOX 2423

City  
BRYSON CITYState  
NCZip Code  
28713-2423FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

246.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710541

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4487 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RHODUS, MITCH, , ,**

Mailing Address 5530 WALTHER DRIVE

City  
FAIRFIELDState  
OHZip Code  
45014-3988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WIT PROMOTIONSOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710603**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711054**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RINN, ROGER, C., DR.,**

Mailing Address 1817 INSPIRATION LN SE

City  
HUNTSVILLEState  
ALZip Code  
35801-1150FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CLINICAL PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.43

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710709**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.18

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4488 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RIPPY, JAMES, , ,

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711622

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RISLEY, JOHN, , ,

Mailing Address 63 TOWER ROAD

City  
EDISONState  
NJZip Code  
08820-3512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE TERRACEOccupation (for Individual)  
CATERING MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712126

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBINSON, EUGENE, , ,

Mailing Address 4766 E 18TH STREET

City  
TUCSONState  
AZZip Code  
85711-4359FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711661

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

72.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4489 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODACK, MARK, , ,**Mailing Address 16051 COLLINS AVE  
3502City  
NORTH MIAMI BEACHState  
FLZip Code  
33160-4624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

782.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712607

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROGERS, WANDA, , ,**Mailing Address 3701 W MCNAB RD  
APT 110City  
POMPANO BEACHState  
FLZip Code  
33069-4931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711294

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, WANDA, , ,**Mailing Address 3701 W MCNAB RD  
APT 110City  
POMPANO BEACHState  
FLZip Code  
33069-4931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711298

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

70.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4490 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROY, ROBERT, , MR.,**Mailing Address 109 7TH ST E  
P.O. BOX 368City  
LEMMONState  
SDZip Code  
57638-1921FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ROY INTERNATIONAL COMPANY, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712110**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711113**

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711623**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4491 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUFFER, JUDY, M., ,**

Mailing Address 380 ROBIN LN

City  
TITUSState  
ALZip Code  
36080-2818FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

Transaction ID : SA11A.27710668

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

Transaction ID : SA11A.27710634

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

580.55

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025

Transaction ID : SA11A.27711027

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4492 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUMBAUGH, EMILY, , ,**

Mailing Address 176 RIDGEDALE

City  
RIDGEDALEState  
MOZip Code  
65739-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BONOBO HOPEOccupation (for Individual)  
RESEARCH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711389

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSHMAN, ROGER, , ,**

Mailing Address 1730 MILLWOOD WAY

City  
THE VILLAGESState  
FLZip Code  
32162-1674FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711584

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710996

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.96



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4493 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUTHER, PATRICIA, M., ,**

Mailing Address 300 CHURCH ST

City  
MATAWANState  
NJZip Code  
07747-1522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710449

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RYAN, LARRY, , ,**

Mailing Address 18 CINDER COURT

City  
SACRAMENTOState  
CAZip Code  
95831-2738FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712349

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RYBERG, JANICE, , MS.,**

Mailing Address 480 E CLARK AVE

City  
SANTA MARIAState  
CAZip Code  
93455-4835FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

394.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710795

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4494 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANGMALEE, VARINEE, , MRS.,**

Mailing Address 4351 LAKE CHIMNEY CT. NE

City  
ROSWELLState  
GAZip Code  
30075-3138FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710683**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANTORO, NANCY, , ,**

Mailing Address P.O. BOX 2095

City  
RANCHO SANTA FEState  
CAZip Code  
92067-2095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1476.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711897**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLEIFFARTH, KAREN, , MS.,**

Mailing Address 1232 DUTCH FIELDS PKWY

City  
MIDWAYState  
UTZip Code  
84049-6931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.17

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711150**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

126.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4495 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHRAGE, MIKE, , ,**

Mailing Address 21262 MULHOLLAND DR

City  
WOODLAND HILLSState  
CAZip Code  
91364-5919FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712366**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHROEDER, STEPHEN, , ,**

Mailing Address 20722 348TH STREET

City  
TAYLORS FALLSState  
MNZip Code  
55084-2848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710573**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHROEDER, STEPHEN, , ,**

Mailing Address 20722 348TH STREET

City  
TAYLORS FALLSState  
MNZip Code  
55084-2848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

912.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710576**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

184.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4496 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHROEDER, STEPHEN, , ,**

Mailing Address 20722 348TH STREET

City  
TAYLORS FALLSState  
MNZip Code  
55084-2848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.54

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710577**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHROEDER, STEPHEN, , ,**

Mailing Address 20722 348TH STREET

City  
TAYLORS FALLSState  
MNZip Code  
55084-2848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.54

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710580**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHROEDER, STEPHEN, , ,**

Mailing Address 20722 348TH STREET

City  
TAYLORS FALLSState  
MNZip Code  
55084-2848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

912.54

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712605**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4497 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHRUM, VALERIE, , ,**

Mailing Address 8654 WEDGEWOOD LN N

City  
MAPLE GROVEState  
MNZip Code  
55369-4615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.80

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713138**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, JOAN, C., MS.,**

Mailing Address 5094 TEN MILE PL.

City  
CASTLE ROCKState  
COZip Code  
80108-8837FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.53

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710569**

Amount of Each Receipt this Period

20.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, RODGER, C., MR.,**Mailing Address 20405 SE 344TH  
#851City  
AUBURNState  
WAZip Code  
98092-1592FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.10

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711752**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4498 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEGRAVES, GILDA, G., ,**

Mailing Address 14236 S SWAN RD

City  
GULFPORTState  
MSZip Code  
39503-9073FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

661.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713128**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SERIO, THOMAS, , ,**

Mailing Address 20981 COASTVIEW LN

City  
HUNTINGTON BEACHState  
CAZip Code  
92648-5271FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CEOOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712273**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SESSIONS, ROXANNE, , ,**

Mailing Address 8592CREEKWAY

City  
ALANSONState  
MIZip Code  
49706-8516FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710508**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4499 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEXTON, MARTHA, , ,**

Mailing Address 204 FOUNTAIN VIEW

City  
SHREVEPORTState  
LAZip Code  
71118-2972FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710468

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHAW, JERRY, , ,**

Mailing Address HC79 BOX 3712

City  
SAHUARITAState  
AZZip Code  
85629-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711978

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHEIKH, JAMIL, , ,**Mailing Address 1345 AVENUE OF THE AMERICAS  
2ND FLOORCity  
NEW YORKState  
NYZip Code  
10105-0302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JSARCHITECTSOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

374.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710533

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

122.88

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4500 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHRINER, ROBERT, , ,

Mailing Address 519 MIAMI CLUB CT

City  
MISHAWAKAState  
INZip Code  
46544-2675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1435.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712975

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHUGER, JILL, , ,

Mailing Address N7756 BUSHEY RD

City  
TREGOState  
WIZip Code  
54888-9327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712389

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIEWERT, CHARLES, R., ,

Mailing Address 6067 HOGAN DR N

City  
KEIZERState  
ORZip Code  
97303-7445FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711072

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

75.21



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4501 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIMPSON, ROBIN, , ,**

Mailing Address 111 COUNTRY OAKS DR.

City  
MACONState  
GAZip Code  
31220-2668FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.43

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712308**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SINHA, RENUKA, , MR.,**

Mailing Address 14 BELLAVISTA CT

City  
EDISONState  
NJZip Code  
08820-4439FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710625**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLAUGHTER, ROBERT, L., ,**

Mailing Address 1311 SQUIRES LN.

City  
AUBREYState  
TXZip Code  
76227-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

760.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713317**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4502 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, BOBBIE, , ,**

Mailing Address 11871 INDIAN CREEK RD

City  
DUNCANVILLEState  
ALZip Code  
35456-2719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

COMMERCIAL ROOFING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712234

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, CAROLYNE, , ,**

Mailing Address 115 LLINDEN DRIVE

City  
DANVILLEState  
VAZip Code  
24541-3521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711323

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, GINGER, M., MS.,**

Mailing Address 2348 TRAILWOOD DR

City  
CANTONMENTState  
FLZip Code  
32533-6709FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

381.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712049

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

260.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4503 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, MARSHALL, A., MR.,**Mailing Address 23050 VIA ESPLENDOR  
V39City  
CUPERTINOState  
CAZip Code  
95014-6569FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712407

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, TOM, R., MR.,**

Mailing Address 1125 MARK PLACE, NW

City  
KENNESAWState  
GAZip Code  
30144-6301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710817

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710846

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

215.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4504 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNODGRASS, DIANNE, , ,**

Mailing Address 808 W. CRESSE AVE.

City  
WILDWOODState  
NJZip Code  
08260-1565FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711208**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SNOWDEN, JAMES, , MR., III**

Mailing Address 4033 TAMWORTH RD

City  
FORT WORTHState  
TXZip Code  
76116-7337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1694.01

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711138**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SNYDER, CARLA, , ,**

Mailing Address 15725 S. INDEPENDENCE CT., APT. 2W

City  
OAK FORESTState  
ILZip Code  
60452-3249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CCSSOccupation (for Individual)  
RESIDENTIAL MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

546.96

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711594**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

184.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4505 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SORENSEN, MONTE, , ,**

Mailing Address 1946 DEERWOOD TRL

City  
KRONENWETTERState  
WIZip Code  
54455-8071FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.14

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711020**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOUTHARD, DIANA, , ,**

Mailing Address 1346 HICKORY RIDGE LN

City  
COLUMBUSState  
OHZip Code  
43235-1131FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.71

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710513**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOVA, ALESIA, , ,**

Mailing Address 8650 GATEWICK DR.

City  
COLORADO SPRINGSState  
COZip Code  
80920-7393FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713358**

Amount of Each Receipt this Period

125.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

184.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4506 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711104**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711106**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

764.59

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711108**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

29.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4507 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711111

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPATARO, JOSEY, , ,**

Mailing Address 4303 OAKHURSRT TERRACE

City  
TAMPAState  
FLZip Code  
33618-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710746

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPATARO, JOSEY, , ,**

Mailing Address 4303 OAKHURSRT TERRACE

City  
TAMPAState  
FLZip Code  
33618-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710751

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

66.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4508 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPATARO, JOSEY, , ,**

Mailing Address 4303 OAKHURSRT TERRACE

City  
TAMPAState  
FLZip Code  
33618-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710752

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPATARO, JOSEY, , ,**

Mailing Address 4303 OAKHURSRT TERRACE

City  
TAMPAState  
FLZip Code  
33618-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710754

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPATARO, JOSEY, , ,**

Mailing Address 4303 OAKHURSRT TERRACE

City  
TAMPAState  
FLZip Code  
33618-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710759

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.88



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4509 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPECHT, VIVIAN, , ,**

Mailing Address PO BOX 63

City  
LYMANState  
NEZip Code  
69352-0063FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710796

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPECHT, VIVIAN, , ,**

Mailing Address PO BOX 63

City  
LYMANState  
NEZip Code  
69352-0063FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710798

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPECHT, VIVIAN, , ,**

Mailing Address PO BOX 63

City  
LYMANState  
NEZip Code  
69352-0063FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

427.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710809

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4510 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEPHENS, RANDY, P., MR.,**

Mailing Address 250 CR 416

City  
COMANCHEState  
TXZip Code  
76442-4639FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SUREGROW AG PRODUCTSOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712877**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEUART, BRADLEY, W., MR.,**

Mailing Address 991 DEBORAH CIR

City  
BOUNTIFULState  
UTZip Code  
84010-2324FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
A G L LOccupation (for Individual)  
LIBRARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712553**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STONE, WILLIAM, , ,**

Mailing Address 2464 HEDIGHAM BLVD

City  
WIXOMState  
MIZip Code  
48393-1720FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712847**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4511 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2025

**Transaction ID : SA11A.27711194**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2025

**Transaction ID : SA11A.27711197**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2025

**Transaction ID : SA11A.27711198**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4512 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711200**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711206**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

668.92

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711211**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 4513 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711213**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711225**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STREBECK, JULIA, , ,**

Mailing Address 5315 CR 922

City  
NEVADAState  
TXZip Code  
75173-6161FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710520**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4514 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRONG, JAMES, T., , SR.**

Mailing Address P O BOX 457

City  
DELHIState  
LAZip Code  
71232-0457FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712861**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUNDERLIN, REBECCA, , ,**

Mailing Address 617 GROVE ST.

City  
ULYSSESState  
PAZip Code  
16948-9463FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713221**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TANNER, CHARLES, , ,**

Mailing Address 4 WOODVALE ROAD

City  
GLEN ROCKState  
NJZip Code  
07452-3612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710901**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

312.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4515 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TERHAAR, PAT, , ,**

Mailing Address P.O. BOX 1009

City  
HILTONState  
NYZip Code  
14468-0509FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710599**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TETU, EMILE, , ,**

Mailing Address 44 NORRIS STREET

City

MANCHESTER

State

NH

Zip Code

03103-3726

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711800**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THERRIEN, WILLIAM, G., MR.,**

Mailing Address 8 ELK RIDGE ROAD

City

CALIFON

State

NJ

Zip Code

07830-4112

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712668**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

243.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4516 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMAS, LORITA, , ,**

Mailing Address 2000 WEST INTERNATIONAL AIRPORT RO

City  
ANCHORAGEState  
AKZip Code  
99502-1117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ATP MEDICINE, LTDOccupation (for Individual)  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712418

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THORNE, MIKELL, , ,**

Mailing Address POBOX 19283

City  
INDIANAPOLISState  
INZip Code  
46219-0283FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711628

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THORNE, MIKELL, , ,**

Mailing Address POBOX 19283

City  
INDIANAPOLISState  
INZip Code  
46219-0283FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712683

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.98



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4517 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TOBEN, DENNIS, , ,**

Mailing Address 19501 40TH AVENUE WEST #545

City  
LYNNWOODState  
WAZip Code  
98036-5799FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710601**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TORTORA, PETER, , MR.,**

Mailing Address 45 REILLY RD

City  
EASTONState  
CTZip Code  
06612-1736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FAIRFIELD MEDICAL GROUP, LLCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712731**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRAN, TUAN, , ,**

Mailing Address 9041 GREENVILL AVE.

City  
WESTMINSTERState  
CAZip Code  
92683-5514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IHSSOccupation (for Individual)  
PRAYER; WORKER; WRITER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

271.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712980**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4518 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TREMELLING, SHERRY, , ,

Mailing Address 1144 AIRPORT DR.

City  
ALEX CITYState  
ALZip Code  
35010-3435FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHARMACIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710935

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TREMELLING, SHERRY, , ,

Mailing Address 1144 AIRPORT DR.

City  
ALEX CITYState  
ALZip Code  
35010-3435FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHARMACIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710943

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TROYER, DENNIS, , ,

Mailing Address 2192 GLEN COVE WAY

City  
HIGH POINTState  
NCZip Code  
27265-9445FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

377.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712301

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4519 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TROYER, DENNIS, , ,**

Mailing Address 2192 GLEN COVE WAY

City  
HIGH POINTState  
NCZip Code  
27265-9445FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712343

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TUKE, THOMAS, , ,**

Mailing Address 19 HAYFIELD WAY

City  
PITTSFORDState  
NYZip Code  
14534-4621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711878

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TYPER, DONALD, R., MR.,**

Mailing Address 410 N WEAVER ST

City  
HESSTONState  
KSZip Code  
67062-9041FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLC REALESTATE SERVICESOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

335.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712501

Amount of Each Receipt this Period

12.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4520 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UMBARGER, BRENDA, L., ,**

Mailing Address P.O. BOX 1774

City  
FRITCHState  
TXZip Code  
79036-1774FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712792**

Amount of Each Receipt this Period

16.29

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VALLE, WILLIAM, , ,**

Mailing Address 20140 RIVERBROOKE RUN

City  
ESTEROState  
FLZip Code  
33928-2979FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711438**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710719**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 4521 OF 6441

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711804**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712303**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN ROEKEL, MELANIE, J., ,**

Mailing Address 2602 100TH STREET

City  
WILTONState  
IAZip Code  
52778-9550FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

333.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710453**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4522 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VANDER LEESE, ARLAND, KEITH, MR.,**

Mailing Address PO BOX 375

City  
SULLYState  
IAZip Code  
50251-0375FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SALH TRANSPORTOccupation (for Individual)  
TRANSPORTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1385.84

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712538**

Amount of Each Receipt this Period

209.22

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAUGHAN, THOMAS, , ,**

Mailing Address 70 EAST BROOKE STREET

City  
JACKSONState  
MSZip Code  
39216-4714FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.59

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712267**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAVRA, CATHERINE, , MRS.,**Mailing Address 2000 AVONLEA PL  
APT 104City  
WOODSTOCKState  
GAZip Code  
30189-7101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711351**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

296.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4523 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAVRA, CATHERINE, , MRS.,**Mailing Address 2000 AVONLEA PL  
APT 104City  
WOODSTOCKState  
GAZip Code  
30189-7101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711365**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAWTER, STEVE, , ,**

Mailing Address 1701 CATALINA AVE

City  
SEAL BEACHState  
CAZip Code  
90740-5710FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712655**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VENNUM, PAULINE, , ,**

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDOState  
FLZip Code  
32801-4360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

675.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711177**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4524 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VENNUM, PAULINE, , ,

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDOState  
FLZip Code  
32801-4360FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711193

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VENNUM, PAULINE, , ,

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDOState  
FLZip Code  
32801-4360FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711199

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VENNUM, PAULINE, , ,

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDOState  
FLZip Code  
32801-4360FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

675.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712224

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

214.51



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4525 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VERCHIO, JUDITH, , ,**

Mailing Address 1236 DARTFORD DR

City  
TARPON SPGSState  
FLZip Code  
34688-7640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711196**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VERPLANCK, JAMES, S., MR.,**

Mailing Address 3525 BRIDGEFIELD DR.

City  
LAKELANDState  
FLZip Code  
33803-5912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712281**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VILLABONA, MARTHA, , ,**

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMIState  
FLZip Code  
33143-8048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27710637**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4526 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VILLABONA, MARTHA, , ,

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMIState  
FLZip Code  
33143-8048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710638

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VILLABONA, MARTHA, , ,

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMIState  
FLZip Code  
33143-8048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710641

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VILLABONA, MARTHA, , ,

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMIState  
FLZip Code  
33143-8048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27710651

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

111.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4527 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VILLABONA, MARTHA, , ,**

Mailing Address 6255 SOUTHWEST 85TH STREET

City  
MIAMIState  
FLZip Code  
33143-8048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.37

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710663**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713155**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VON SCHIMMELMANN, KAREN, , ,**

Mailing Address 12521 GRITSTONE DRIVE

City  
DENTONState  
TXZip Code  
76207-5747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.76

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711638**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

42.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4528 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WADE, DWIGHT, , ,**

Mailing Address 416 KINGSTON PARK DR.

City  
KNOXVILLEState  
TNZip Code  
37919-6680FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.30

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710902**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WADHAM, THOMAS, A., ,**

Mailing Address 600 FOREST GROVE AVE

City  
DAYTONState  
OHZip Code  
45406-4434FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.41

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710987**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAGNER, SYLVIA, , ,**

Mailing Address 100 MORGAN TRAIL

City  
LIVINGSTONState  
MTZip Code  
59047-8755FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

206.16

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712807**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.77

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4529 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALKER, PATRICIA, V., MS.,**

Mailing Address 1470 RIVERVIEW DR.

City  
LEWISPORT

State  
KY

Zip Code  
42351-2434

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.65

Date of Receipt

**02** / **22** / **2025**

**Transaction ID : SA11A.27711384**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKER, PATRICIA, V., MS.,**

Mailing Address 1470 RIVERVIEW DR.

City  
LEWISPORT

State  
KY

Zip Code  
42351-2434

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.65

Date of Receipt

**02** / **22** / **2025**

**Transaction ID : SA11A.27711521**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALRICH, ROOBERT, , ,**

Mailing Address 12435 HIGHFIELD CIRCLE

City  
BRADENTON

State  
FL

Zip Code  
34202-7910

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.25

Date of Receipt

**02** / **22** / **2025**

**Transaction ID : SA11A.27712822**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

329.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4530 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATERS, TIM, , ,**

Mailing Address 4318 WINDWILLOW LN

City  
CLERMONTState  
FLZip Code  
34714-6277FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712740**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATERS, TIM, , ,**

Mailing Address 4318 WINDWILLOW LN

City  
CLERMONTState  
FLZip Code  
34714-6277FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712762**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRISTOL MYERS SQUIBBOccupation (for Individual)  
COMPETITIVE INTELLIGENCE STRAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711614**

Amount of Each Receipt this Period

1.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4531 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712232**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712970**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEHMAN, JOAN, , ,**

Mailing Address 831 HICKORY KNOB CIRCLE

City  
CEDAR HILLState  
TXZip Code  
75104-7803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1670.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27713257**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4532 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEISS, DAVID, , ,**

Mailing Address 240 HIGH POINT LN

City  
FAIRFIELDState  
CTZip Code  
06824-2020FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712879**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711201**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHEELER, EILEEN, , ,**

Mailing Address IN176 PAPWORTH

City  
CAROL STREAMState  
ILZip Code  
60188-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

342.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27711771**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

206.15



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4533 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHEELER, MIEKA, L., ,**

Mailing Address 27230 STONEY BROOK DR

City  
TRENTONState  
MIZip Code  
48183-4640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.05

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712044**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITE, JAMES, , ,**

Mailing Address 1247 CHEE LANE

City  
TALLAHASSEEState  
FLZip Code  
32304-1662FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PUBLIXOccupation (for Individual)  
FRONT- END CLARK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.50

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712321**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITE, TIM, , ,**

Mailing Address 1011 RIDGLEA DRIVE

City  
BURNSState  
TNZip Code  
37029-5255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

243.56

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710772**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4534 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, BETTY, , ,**

Mailing Address 311 HARPER LOOP

City  
GRANTS PASSState  
ORZip Code  
97527-5339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712934

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, BLAKE, , , JR.**

Mailing Address 155 SUMMERFIELD DR.

City  
JACKSONState  
TNZip Code  
38305-9794FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27712734

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, AUDREY, , ,**

Mailing Address 5216 N MALLORCA WAY

City  
MERIDIANState  
IDZip Code  
83646-7473FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2025

Transaction ID : SA11A.27711434

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

96.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4535 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, BRAD, , ,**

Mailing Address 13 HICKORY KNOLL PLACE

City  
HILTON HEAD ISLANDState  
SCZip Code  
29926-2656FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CHARTER ONE REALTYOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.57

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711522**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, ELIZABETH, , ,**

Mailing Address P.O. BOX 2453

City  
PALMERState  
AKZip Code  
99645-2453FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.73

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711654**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINEGARDNER, MIKE, J., MR.,**

Mailing Address 5711 OLD LOGAN RD. SE

City  
LANCASTERState  
OHZip Code  
43130-8859FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WINEGARDNER ROOFINGOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27710813**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

320.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4536 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINTER, ROBERT, E., MR.,**

Mailing Address 21120 VISTA AMOROSA CT

City  
PINE GROVEState  
CAZip Code  
95665-9481FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712130**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WITT, FRANCIS, M., MR., III**

Mailing Address 500 ROLLING HILLS RD

City  
COPPELLState  
TXZip Code  
75019-4049FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712163**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOOD, RONALD, , MR.,**Mailing Address 21016 SE STARK ST  
UNIT 19City  
GRESHAMState  
ORZip Code  
97030-2043FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2025**Transaction ID : SA11A.27712200**

Amount of Each Receipt this Period

22.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4537 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODHOUSE, MARILYN, M., MRS.,**

Mailing Address 650 RAMBLEWOOD RD.

City  
HOUSTONState  
TXZip Code  
77079-6905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2197.50

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712168**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711368**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712202**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

278.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4538 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOSHIMOTO, MYLES, , ,**

Mailing Address 91-1321 KINOIKI STREET

City  
KAPOLEIState  
HIZip Code  
96707-4106FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.29

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711043**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOSHIMOTO, MYLES, , ,**

Mailing Address 91-1321 KINOIKI STREET

City  
KAPOLEIState  
HIZip Code  
96707-4106FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.29

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711051**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YOUNG, BEVERLY, , MRS.,**

Mailing Address 123 WATERWAY DR.

City  
SAVANNAHState  
GAZip Code  
31411-3125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.51

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27713244**

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

522.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4539 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNG, PATRICIA, , ,**

Mailing Address 9940 PREMIERE VIEW CIR

City  
HAGERSTOWNState  
MDZip Code  
21740-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.42

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27711179**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZEGARELLI, BRENDA, B., MS.,**

Mailing Address 3460 INDIAN LAKE LN.

City  
PELHAMState  
ALZip Code  
35124-2716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.43

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712152**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZHANG, YONGHUI, , ,**

Mailing Address 195 MONROE DR

City  
PALO ALTOState  
CAZip Code  
94306-4416FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA11A.27712258**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4540 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2025

**Transaction ID : SA11C.27713398**

Amount of Each Receipt this Period

70295.44

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABUID, JULIA, , ,**

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2025

**Transaction ID : SA11A.27715644**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

SELF EMPLOYED

CONSULTANT

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2025

**Transaction ID : SA11A.27714866**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

20.57

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4541 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AGEE, BILL, , ,**

Mailing Address 34542 CALLE PALOMA

City  
CAPISTRANO BEACHState  
CAZip Code  
92624-1454FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ARTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715569

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALEXANDER, ROBERT, , ,**

Mailing Address 1001 EAST WHEEL ROAD

City  
BEL AIRState  
MDZip Code  
21015-6342FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714095

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALEXANDER, ROBERT, , ,**

Mailing Address 1001 EAST WHEEL ROAD

City  
BEL AIRState  
MDZip Code  
21015-6342FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

314.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714102

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4542 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALFARO, ROSA, , ,**

Mailing Address 3059 HAWKSCREST DR

City  
WINCHESTERState  
CAZip Code  
92596-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713769**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714402**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, JANET, , MS.,**

Mailing Address 2905 MOCKINGBIRD TRL

City  
CASPERState  
WYZip Code  
82604-3641FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713975**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4543 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, JANET, , MS.,**

Mailing Address 2905 MOCKINGBIRD TRL

City  
CASPERState  
WYZip Code  
82604-3641FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714004**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARONCHICK, ELIZABETH, , ,**

Mailing Address 5310 NORTH OCEAN DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33404-2568FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713565**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AULD, LORNA, , ,**

Mailing Address 4154 N

City  
BOISEState  
IDZip Code  
83704-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

358.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714430**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4544 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAKER, ROBERT, , ,**

Mailing Address 927 MAIN STREET

City  
RAYLANDState  
OHZip Code  
43943-6868FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713814**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BANCROFT, HUGH, , MR., III**

Mailing Address P.O. BOX 25

City  
RANCHO SANTA FEState  
CAZip Code  
92067-0025FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1026.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715336**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARFUSS, WENDY, , MS.,**

Mailing Address 120 SUNNY BRANCH RD

City  
FAR HILLSState  
NJZip Code  
07931-2493FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714640**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4545 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARFUSS, WENDY, , MS.,**

Mailing Address 120 SUNNY BRANCH RD

City  
FAR HILLSState  
NJZip Code  
07931-2493FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.85

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714642**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARFUSS, WENDY, , MS.,**

Mailing Address 120 SUNNY BRANCH RD

City  
FAR HILLSState  
NJZip Code  
07931-2493FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.85

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714644**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARTEL, CRAIG, , ,**

Mailing Address 1850 LEWIS CT

City  
DENVERState  
COZip Code  
80215-2831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

219.30

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713640**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4546 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARTOLI, MARTIN, , ,**

Mailing Address 4730 BELLE ISLE LANE

City  
MOBILEState  
ALZip Code  
36619-9700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.64

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714012**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEASLEY, ROGER, , ,**

Mailing Address 6503 SANTOLINA COVE

City  
AUSTINState  
TXZip Code  
78731-2806FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ROGER BEASLEYOccupation (for Individual)  
AUTO DLR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715193**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BELL, BONNIE, , ,**

Mailing Address 778 1ST ST NW

City  
SAINT PAULState  
MNZip Code  
55112-3216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

288.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713724**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4547 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BELL, SAMUEL, , ,**

Mailing Address 3825 SWEET MAGNOLIA DR.

City  
GAINESVILLEState  
GAZip Code  
30504-5949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713799**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BELLAH, ERIN, , ,**

Mailing Address 8 BILTMORE ESTATE

City  
PHOENIXState  
AZZip Code  
85016-2810FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715173**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BENTLEY, DELORES, , ,**

Mailing Address 4418 ROSSER SQ

City  
DALLASState  
TXZip Code  
75244-6648FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCAOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

349.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714144**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.88

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4548 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BERTOLUCCI, LAWRENCE, E., MR.,

Mailing Address 272 SAVANNAH DR.

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-7903FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713949

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BERTOLUCCI, LAWRENCE, E., MR.,

Mailing Address 272 SAVANNAH DR.

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-7903FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713969

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BINIENDA, MARY, E., MS.,

Mailing Address 28413 ABBEY LN  
APT 172City  
NEW HUDSONState  
MIZip Code  
48165-2804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

844.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714684

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

165.25



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4549 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BINIENDA, MARY, E., MS.,**Mailing Address 28413 ABBEY LN  
APT 172City  
NEW HUDSONState  
MIZip Code  
48165-2804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714693**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713599**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714087**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4550 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714750**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLOMQUIAT, RICHARD, , ,**

Mailing Address 2903 W HIDDEN LAKE RD

City  
MEQUONState  
WIZip Code  
53092-5300FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713911**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOHLEN, LEE, , ,**

Mailing Address 6971 HERITAGE PARKWAY

City  
WESTState  
TXZip Code  
76691-2314FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715233**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

236.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4551 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713725**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714388**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715535**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

132.94

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4552 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTON

State  
TX

Zip Code  
77077-3846

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

**Transaction ID : SA11A.27714649**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTON

State  
TX

Zip Code  
77077-3846

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

**Transaction ID : SA11A.27714653**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTON

State  
TX

Zip Code  
77077-3846

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

**Transaction ID : SA11A.27714656**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

77.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4553 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714659

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714661

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOULINEAU, EDWARD, C., MR.,**

Mailing Address 100 CIRCLE DR

City  
STATESBOROState  
GAZip Code  
30461-0578FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714512

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

146.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4554 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOZEMAN, BARBARA, , ,**

Mailing Address 2414 HIGHWAY 53 E

City  
JASPERState  
GAZip Code  
30143-4346FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713997**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRADLEY, MOLLY, , ,**

Mailing Address 2705 BIRMINGHAM

City  
BIRMINGHAMState  
ALZip Code  
35243-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715460**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRADLEY, MOLLY, , ,**

Mailing Address 2705 BIRMINGHAM

City  
BIRMINGHAMState  
ALZip Code  
35243-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715475**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4555 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713598**

Amount of Each Receipt this Period

2.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715438**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, GARY, , ,**

Mailing Address 16 N CALIBOGUE CAY RD

City  
HILTON HEAD ISLANDState  
SCZip Code  
29928-2913FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713503**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4556 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, HUNTER, , ,**

Mailing Address 9 CONSTITUTION WAY

City  
LITCHFIELDState  
CTZip Code  
06759-3414FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714156**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, KAREN, , ,**

Mailing Address 6800 WILD RIDGE COURT

City  
PLANOState  
TXZip Code  
75024-7467FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LADIES APPAREL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714256**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWNE, RICHARD, , ,**

Mailing Address 15108 W HICKORY RD

City  
ZIONState  
ILZip Code  
60099-9525FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715045**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

206.15



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4557 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, SHARMAN, , MS.,**

Mailing Address 110 CLIFF ST

City  
CORDOVAState  
ALZip Code  
35550-1216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2819.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715161**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRYANT, BASSETT, , ,**

Mailing Address 112 ADOBE PO 350

City  
RUIDOSO DOWNSState  
NMZip Code  
88346-9713FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714084**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUDRAS, JOSEPH, , MR.,**

Mailing Address 3432 PUTNAM ST

City  
FALLS CHURCHState  
VAZip Code  
22042-3727FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

359.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714070**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

197.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4558 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURCHER, PAT, , ,**

Mailing Address 3700 LAKE POWHATAN

City  
WILLIAMSBURGState  
VAZip Code  
23188-8035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.24

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714237**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURDICK, CHARLES, , ,**

Mailing Address 2826 LEMAR STREET

City  
SILVER SPRINGState  
MDZip Code  
20904-1836FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ITA INTERNATIONAL LLCOccupation (for Individual)  
ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714366**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURDICK, CHARLES, , ,**

Mailing Address 2826 LEMAR STREET

City  
SILVER SPRINGState  
MDZip Code  
20904-1836FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ITA INTERNATIONAL LLCOccupation (for Individual)  
ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714371**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

304.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4559 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURDICK, CHARLES, , ,**

Mailing Address 2826 LEMAR STREET

City  
SILVER SPRINGState  
MDZip Code  
20904-1836FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ITA INTERNATIONAL LLCOccupation (for Individual)  
ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714374**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURGER, JERRY, , MR.,**

Mailing Address 7316 NICHOLS RD

City  
NICHOLS HILLSState  
OKZip Code  
73120-1227FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713646**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURGER, JERRY, , MR.,**

Mailing Address 7316 NICHOLS RD

City  
NICHOLS HILLSState  
OKZip Code  
73120-1227FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713647**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4560 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURGER, JERRY, , MR.,**

Mailing Address 7316 NICHOLS RD

City  
NICHOLS HILLSState  
OKZip Code  
73120-1227FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713649

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURGER, JERRY, , MR.,**

Mailing Address 7316 NICHOLS RD

City  
NICHOLS HILLSState  
OKZip Code  
73120-1227FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713655

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURGER, JERRY, , MR.,**

Mailing Address 7316 NICHOLS RD

City  
NICHOLS HILLSState  
OKZip Code  
73120-1227FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713685

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4561 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURGER, JERRY, , MR.,**

Mailing Address 7316 NICHOLS RD

City  
NICHOLS HILLSState  
OKZip Code  
73120-1227FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713688**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURGER, JERRY, , MR.,**

Mailing Address 7316 NICHOLS RD

City  
NICHOLS HILLSState  
OKZip Code  
73120-1227FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713691**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURGER, JERRY, , MR.,**

Mailing Address 7316 NICHOLS RD

City  
NICHOLS HILLSState  
OKZip Code  
73120-1227FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713692**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4562 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURGER, JERRY, , MR.,**

Mailing Address 7316 NICHOLS RD

City  
NICHOLS HILLSState  
OKZip Code  
73120-1227FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713694**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURGER, JERRY, , MR.,**

Mailing Address 7316 NICHOLS RD

City  
NICHOLS HILLSState  
OKZip Code  
73120-1227FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713700**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURNEY, THOMAS, R., MR.,**

Mailing Address 5162 BELMEZ

City  
LAGUNA WOODSState  
CAZip Code  
92637-1810FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

283.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714328**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4563 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUSING, DON, , ,**

Mailing Address 6919 NUNN ROAD

City  
LAKELANDState  
FLZip Code  
33813-3821FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714646**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CADICAMO, EVELYN, M., MRS.,**

Mailing Address 43577 SERENITY DR

City  
NORTHVILLEState  
MIZip Code  
48167-8932FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.71

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714952**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CALLAHAN, DOROTHY, , ,**

Mailing Address 6704 LAKE INVERNESS CT

City  
ROGERSState  
ARZip Code  
72758-8975FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.03

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713797**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4564 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAPALBO, JOHN, , MR.,**

Mailing Address 6825 E WASHINGTON BLVD

City  
LOS ANGELESState  
CAZip Code  
90040-1905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714703**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARBO, LINDA, , ,**

Mailing Address 23 SHIRRA AVENUE

City  
STATEN ISLANDState  
NYZip Code  
10314-4986FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.16

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715345**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARBONELL, NESTOR, T., MR.,**Mailing Address 600 GRAPETREE DR.  
APT 8CNCity  
KEY BISCAVNEState  
FLZip Code  
33149-2704FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715240**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.21



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4565 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNES, CALLAND, , ,**

Mailing Address 11078 SAFFOLD WAY

City  
RESTONState  
VAZip Code  
20190-3812FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714226

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARNES, CALLAND, , ,**

Mailing Address 11078 SAFFOLD WAY

City  
RESTONState  
VAZip Code  
20190-3812FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715524

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713951

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

104.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4566 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715362**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715364**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715407**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4567 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARVER, CYNDI, , ,**Mailing Address 25739 135TH AVE SE  
UNIT 71City  
KENTState  
WAZip Code  
98042-3551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715332

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CASE, CHARLES, , MR.,**

Mailing Address 1540 CARR ST

City  
RALEIGHState  
NCZip Code  
27608-2302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EARTH AND WATER LAWOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715504

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CASE, CHARLES, , MR.,**

Mailing Address 1540 CARR ST

City  
RALEIGHState  
NCZip Code  
27608-2302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EARTH AND WATER LAWOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715506

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

194.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4568 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CASTRICHINI, FRANK, , ,**

Mailing Address 7 CASTLECREEK CT

City  
DALLASState  
TXZip Code  
75225-1808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714006**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHASTAIN, HOLLACE, , ,**

Mailing Address 4470 BROOK HOLLOW DRIVE

City  
FORT WAYNEState  
INZip Code  
46814-9742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PARKVIEW HEALTHOccupation (for Individual)  
CARDIOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714080**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHINCHAR, MARK, J., MR.,**

Mailing Address 23256 MAYBELLE DR.

City  
WESTLAKEState  
OHZip Code  
44145-2821FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ST. BERNADETTE CHURCHOccupation (for Individual)  
MAINTENANCE SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713504**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

391.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4569 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHRESTENSEN, PAUL, , ,**

Mailing Address 148 EDGEMERE WAY S

City  
NAPLESState  
FLZip Code  
34105-7107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.96

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715109**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHRISTIANSEN, ALAN, L., MR.,**

Mailing Address 12121 W. WILMINGTON RD.

City  
PEOTONEState  
ILZip Code  
60468-9726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715497**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHRISTIE, JOHN, , ,**

Mailing Address 1575 HERITAGE DR, STE 107

City  
MCKINNEYState  
TXZip Code  
75069-3395FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

698.65

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715183**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.97

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4570 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CIACCIO, JANE, , ,**

Mailing Address **5491 BEECHMONT AVE**  
**APT 506**

City  
**CINCINNATI**

State  
**OH**

Zip Code  
**45230-1160**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**841.25**

Date of Receipt

**02 / 23 / 2025**

**Transaction ID : SA11A.27714557**

Amount of Each Receipt this Period

**46.53**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CIMINO, SHIRLEY, R., MS.,**

Mailing Address **44600 MONTEREY AVE. APT. A219**

City  
**PALM DESERT**

State  
**CA**

Zip Code  
**92260-3368**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**549.24**

Date of Receipt

**02 / 23 / 2025**

**Transaction ID : SA11A.27714137**

Amount of Each Receipt this Period

**78.08**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLARK, BONNIE, , ,**

Mailing Address **9217 W SIERRA PINTA DR**

City  
**PEORIA**

State  
**AZ**

Zip Code  
**85382-0983**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**262.35**

Date of Receipt

**02 / 23 / 2025**

**Transaction ID : SA11A.27714745**

Amount of Each Receipt this Period

**104.10**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**228.71**

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4571 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COFFMAN, GREG, , ,

Mailing Address 121 GOLD DUST TRAIL

City  
ALLENState  
TXZip Code  
75002-8469FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715351

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COHEN, JOEL, D., MR.,

Mailing Address 2410 ROCHESTER RDD

City  
ROYAL OAKState  
MIZip Code  
48073-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714602

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COKER, ELIZABETH, , ,

Mailing Address P O BOX 201

City  
TURBEVILLEState  
SCZip Code  
29162-0201FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713850

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

121.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4572 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINGS, KEVIN, , ,**

Mailing Address 6208 HAYLEY COURT

City  
SPRINGFIELD

State  
IL

Zip Code  
62712-8668

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27713924**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARS

State  
PA

Zip Code  
16046-0988

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.49

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27715440**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COONLY, JOHN, , ,**

Mailing Address 300 WEST AVE APT 2326

City  
AUSTIN

State  
TX

Zip Code  
78701-3808

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

541.28

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27714423**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

140.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4573 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COONLY, JOHN, , ,**

Mailing Address 300 WEST AVE APT 2326

City  
AUSTINState  
TXZip Code  
78701-3808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714511

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CORTESE, FRIEDA, , ,**

Mailing Address 24 WESTBOURNE LANE

City  
MELVILLEState  
NYZip Code  
11747-3305FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714510

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORTNER, DIANE, , ,**

Mailing Address 4849 FLORIDA AVE NORTH

City  
MINNEAPOLISState  
MNZip Code  
55428-4609FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713927

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4574 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COSTA, SARAH, , ,**

Mailing Address 13965 S CYPRESS COVE CIR

City  
DAVIEState  
FLZip Code  
33325-6742FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715164**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRABTREE, CYNTHIA, , ,**

Mailing Address 13411 FM 807

City  
DALHARTState  
TXZip Code  
79022-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.80

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714699**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRABTREE, CYNTHIA, , ,**

Mailing Address 13411 FM 807

City  
DALHARTState  
TXZip Code  
79022-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

354.80

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715533**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4575 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIGO, JACQUELINE, L., MS.,**

Mailing Address 1049 SUMMIT DR

City  
MOUNT VERNONState  
OHZip Code  
43050-9576FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1371.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715267**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIS, JUDY, L., MRS.,**

Mailing Address 405 KEYS LANE

City  
HEPHZIBAHState  
GAZip Code  
30815-5411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714787**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CROCKETT, JULIETTE, , ,**

Mailing Address 250 E DEBBIE LN. APT 5311

City  
MANSFIELDState  
TXZip Code  
76063-9238FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715166**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

583.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4576 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CROUCH, PAULINE, , ,**

Mailing Address 198 DONIZETTI DR.

City  
WESTMINSTERState  
MDZip Code  
21157-6938FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSTRUCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714827

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CULBERTSON, LLOYD, , ,**

Mailing Address 10705S SW 69TH CT.

City  
PINECRESTState  
FLZip Code  
33156-3932FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714271

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CULBERTSON, LLOYD, , ,**

Mailing Address 10705S SW 69TH CT.

City  
PINECRESTState  
FLZip Code  
33156-3932FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

994.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714572

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

234.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4577 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CUMMINGS, DAN, , ,**

Mailing Address 10300 RED ROCK RD

City  
RENOState  
NVZip Code  
89508-8187FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713568**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURTIS, JAMES, , ,**

Mailing Address 163 DUMOND DRIVE

City

LAGUNA BEACH

State

CA

Zip Code

92651-3937

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713772**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. D'ARMOND, DAVID, B., ,**

Mailing Address 2800 VIA ROSSO ST UNIT 502

City

SPRINGFIELD

State

IL

Zip Code

62703-6803

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

379.88

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713621**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4578 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. D'ARMOND, DAVID, B., ,**

Mailing Address 2800 VIA ROSSO ST UNIT 502

City  
SPRINGFIELDState  
ILZip Code  
62703-6803FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.88

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713638**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAHIN, JOHN, , ,**

Mailing Address 224 RIDGEWOOD ST

City

ALTAMONTE SPRINGS

State  
FLZip Code  
32701-7613FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.64

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714559**

Amount of Each Receipt this Period

24.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAOUST, THOMAS, , ,**

Mailing Address 1241 BOYDEN PL NW

City

CONCORD

State  
NCZip Code  
28027-8088FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.29

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714341**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4579 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAOUST, THOMAS, , ,**

Mailing Address 1241 BOYDEN PL NW

City  
CONCORDState  
NCZip Code  
28027-8088FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714352

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAOUST, THOMAS, , ,**

Mailing Address 1241 BOYDEN PL NW

City  
CONCORDState  
NCZip Code  
28027-8088FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714354

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAVIS, TINE, , ,**

Mailing Address 2210 BEACH BOULEVARD

City  
JACKSONVILLE BEACHState  
FLZip Code  
32250-2653FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

514.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715373

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4580 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAY, SHARON, , ,**

Mailing Address 85 CARTER DR.

City  
NORTH MONMOUTHState  
MEZip Code  
04265-6019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713536

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEAN, RICHARD, , ,**

Mailing Address 174 JAPONICA AVE

City  
CAMARILLOState  
CAZip Code  
93012-5168FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENT ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714875

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714903

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

158.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4581 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DENHOFF, DIANE, K., ,**

Mailing Address 1908 STATE ROUTE 19

City  
WELLSVILLEState  
NYZip Code  
14895-9740FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.26

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713853**

Amount of Each Receipt this Period

1.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DERDA, JOHN, , ,**

Mailing Address 1195 W BERTRAND RD

City  
NILESState  
MIZip Code  
49120-8772FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CABINETMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714735**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DICKSON, REGINALD, , ,**

Mailing Address 118 CARRIAGE HILL DR.

City  
BATTLE CREEKState  
MIZip Code  
49017-3174FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715279**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4582 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DINIVAH, MURTY, , ,**

Mailing Address 5602 MUMFORD PATH

City  
SAN ANTONIOState  
TXZip Code  
78228-3528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ARMYOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.90

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715536**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DONOVAN, ANNE, , ,**

Mailing Address 4 WEDGE LANE

City  
SELDENState  
NYZip Code  
11784-3309FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.14

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714148**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DRAZAN, ARTHUR, D., ,**

Mailing Address 330 EAGLE DRIVE

City  
JUPITERState  
FLZip Code  
33477-4066FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

654.37

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714716**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4583 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUDA, JOSEPH, , ,**

Mailing Address 7052 MERCADO LANE

City  
MELBOURNEState  
FLZip Code  
32940-7645FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714119**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUFFY, GERARD, , ,**

Mailing Address 39 BAYBERRY LN

City  
MIDDLETOWNState  
NJZip Code  
07748-1424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715515**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUFFY, GERARD, , ,**

Mailing Address 39 BAYBERRY LN

City  
MIDDLETOWNState  
NJZip Code  
07748-1424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

801.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715516**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4584 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUFFY, GERARD, , ,**

Mailing Address 39 BAYBERRY LN

City  
MIDDLETOWNState  
NJZip Code  
07748-1424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715517**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUFFY, GERARD, , ,**

Mailing Address 39 BAYBERRY LN

City  
MIDDLETOWNState  
NJZip Code  
07748-1424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715518**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUGAS, ROLAND, , MR.,**

Mailing Address 408 ELYSIAN FIELDS DR

City  
LAFAYETTEState  
LAZip Code  
70508-6058FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715244**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4585 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUGAS, ROLAND, , MR.,**

Mailing Address 408 ELYSIAN FIELDS DR

City  
LAFAYETTEState  
LAZip Code  
70508-6058FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.87

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715246**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUGAS, ROLAND, , MR.,**

Mailing Address 408 ELYSIAN FIELDS DR

City  
LAFAYETTEState  
LAZip Code  
70508-6058FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.87

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715248**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUGAS, ROLAND, , MR.,**

Mailing Address 408 ELYSIAN FIELDS DR

City  
LAFAYETTEState  
LAZip Code  
70508-6058FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.87

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715250**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

24.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4586 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUGAS, ROLAND, , MR.,**

Mailing Address 408 ELYSIAN FIELDS DR

City  
LAFAYETTEState  
LAZip Code  
70508-6058FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715301

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUKE, DAVID, , ,**

Mailing Address 31395 AVENIDA DEL REPOSO

City  
TEMECULAState  
CAZip Code  
92591-1780FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715289

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714337

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

117.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4587 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EASTMAN, STEVEN, , ,**

Mailing Address 6848 N GOVERNMENT WAY 114

City  
DALTON GARDENSState  
IDZip Code  
83815-7799FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714538**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-6174FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714046**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSONState  
MDZip Code  
21204-4701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713648**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4588 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSONState  
MDZip Code  
21204-4701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713921**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENGLISH, SHERRY, , ,**

Mailing Address 15815 BOOTH CIR

City  
VOLANTEState  
TXZip Code  
78641-6018FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714728**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENGLISH, SHERRY, , ,**

Mailing Address 15815 BOOTH CIR

City  
VOLANTEState  
TXZip Code  
78641-6018FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714736**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4589 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENGLISH, SHERRY, , ,**

Mailing Address 15815 BOOTH CIR

City  
VOLENTEState  
TXZip Code  
78641-6018FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.30

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714737**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENGLISH, SHERRY, , ,**

Mailing Address 15815 BOOTH CIR

City  
VOLENTEState  
TXZip Code  
78641-6018FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.30

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714746**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENGLISH, SHERRY, , ,**

Mailing Address 15815 BOOTH CIR

City  
VOLENTEState  
TXZip Code  
78641-6018FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

579.30

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714748**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4590 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ESPELAND, ROBERT, R., ,**

Mailing Address 13705 NW 44TH AVE

City  
VANCOUVERState  
WAZip Code  
98685-1538FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714089**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EYMIL, CHERYLE, , ,**

Mailing Address 5008 KINGSWAY

City  
ANACORTESState  
WAZip Code  
98221-3016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715285**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EYMIL, CHERYLE, , ,**

Mailing Address 5008 KINGSWAY

City  
ANACORTESState  
WAZip Code  
98221-3016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715286**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4591 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EYMIL, CHERYLE, , ,**

Mailing Address 5008 KINGSWAY

City  
ANACORTESState  
WAZip Code  
98221-3016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715292**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EYMIL, CHERYLE, , ,**

Mailing Address 5008 KINGSWAY

City  
ANACORTESState  
WAZip Code  
98221-3016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715294**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EYMIL, CHERYLE, , ,**

Mailing Address 5008 KINGSWAY

City  
ANACORTESState  
WAZip Code  
98221-3016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715295**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4592 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EYMIL, CHERYLE, , ,**

Mailing Address 5008 KINGSWAY

City  
ANACORTESState  
WAZip Code  
98221-3016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715307**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FINCH, OWEN, , ,**

Mailing Address 5210 CHAMPLAIN BEND ST

City  
HOUSTONState  
TXZip Code  
77056-4206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.44

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714857**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFFState  
AZZip Code  
86005-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

709.05

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713407**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4593 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFFState  
AZZip Code  
86005-8967FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713408**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLACK, LUCILLE, , ,**

Mailing Address 1207 CAMPBELLAVE

City  
LYNCHBURGState  
VAZip Code  
24501-2815FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714786**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLEMING, DEBORAH, , MS.,**

Mailing Address 1629 E. JEFFERSON BLVD.

City  
MISHAWAKAState  
INZip Code  
46545-7103FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714889**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 4594 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLEMING, DEBORAH, , MS.,**

Mailing Address 1629 E. JEFFERSON BLVD.

City  
MISHAWAKAState  
INZip Code  
46545-7103FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.10

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714897**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLORA, SCOTT, , ,**

Mailing Address 4068 CURLED DOCK LANE

City  
ODENTONState  
MDZip Code  
21113-3143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714994**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FORD, TOM, , ,**

Mailing Address 7526 BEAU TERRE

City  
CORPUS CHRISTIState  
TXZip Code  
78414-6290FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
US NAVYOccupation (for Individual)  
GS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714292**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4595 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORTNER, EDWARD, , ,**

Mailing Address 13477 AURORA DRIVE

City  
SAN LEANDROState  
CAZip Code  
94577-4032FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714526

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FOUT, SANDRA, , MS.,**

Mailing Address 13019 N SUNRISE CANYON LN

City  
MARANAState  
AZZip Code  
85658-4035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BD OF EDOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715503

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FREELAND, JOHN, , ,**

Mailing Address 17383 HAXBY LANE

City  
WESTFIELDState  
INZip Code  
46074-3352FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

311.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713617

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4596 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRITZ, JOHN, , MR.,**

Mailing Address P.O. BOX 3115

City  
BIG BEAR LAKEState  
CAZip Code  
92315-3115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714282

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FUCIK, JOHN, , ,**

Mailing Address 3110 TAMARISK DRIVE

City  
RENOState  
NVZip Code  
89502-9743FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715195

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714858

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.54



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4597 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GELBMAN, JOEL, , ,**

Mailing Address 6476 ARRIBA AVE

City  
NAPLES

State  
FL

Zip Code  
34113-9061

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.55

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27715428**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GEORGUSIS, JOSEPH, , ,**

Mailing Address 2 FORREST COURT

City  
METAIRIE

State  
LA

Zip Code  
70001-6155

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.21

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27714303**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIBSON, JOYCE, , ,**

Mailing Address 1701 HOPEMAN PARKWAY

City  
WAYNESBORO

State  
VA

Zip Code  
22980-1970

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.40

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27715072**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

25.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4598 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILLARD, SCOTT, , ,**

Mailing Address 212 ELM ST

City  
HANOVERState  
MAZip Code  
02339-2832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALVIN HOLLISOccupation (for Individual)  
HVAC TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714603**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIORDANO, MICHAEL, , ,**

Mailing Address 59 YOWAGO AVE

City  
BRANFORDState  
CTZip Code  
06405-5526FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GIORDANOOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3029.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715318**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIUGLIANO, ROBERT, , ,**

Mailing Address 2202 BUCKHOLT STREET

City  
PEARLANDState  
TXZip Code  
77581-6218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714528**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1068.93

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4599 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIUGLIANO, ROBERT, , ,**

Mailing Address 2202 BUCKHOLT STREET

City  
PEARLAND

State  
TX

Zip Code  
77581-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.65

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27714530**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIUGLIANO, ROBERT, , ,**

Mailing Address 2202 BUCKHOLT STREET

City  
PEARLAND

State  
TX

Zip Code  
77581-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.65

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27714532**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIUGLIANO, ROBERT, , ,**

Mailing Address 2202 BUCKHOLT STREET

City  
PEARLAND

State  
TX

Zip Code  
77581-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.65

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27714537**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

44.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4600 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIUGLIANO, ROBERT, , ,**

Mailing Address 2202 BUCKHOLT STREET

City  
PEARLAND

State  
TX

Zip Code  
77581-6218

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.65

Date of Receipt

**02** / **23** / **2025**

**Transaction ID : SA11A.27714544**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIUGLIANO, ROBERT, , ,**

Mailing Address 2202 BUCKHOLT STREET

City  
PEARLAND

State  
TX

Zip Code  
77581-6218

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.65

Date of Receipt

**02** / **23** / **2025**

**Transaction ID : SA11A.27714577**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIUGLIANO, ROBERT, , ,**

Mailing Address 2202 BUCKHOLT STREET

City  
PEARLAND

State  
TX

Zip Code  
77581-6218

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.65

Date of Receipt

**02** / **23** / **2025**

**Transaction ID : SA11A.27714586**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

59.95

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4601 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLENFIELD, STEPHEN, , ,**

Mailing Address **PO BOX 596**

City  
**LONDONDERRY**

State  
**NH**

Zip Code  
**03053-0596**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**218.61**

Date of Receipt

**02 / 23 / 2025**

**Transaction ID : SA11A.27713998**

Amount of Each Receipt this Period

**10.41**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLOVER, AVERIL, , ,**

Mailing Address **446 LANCASHIRE RUN**

City  
**SMITHFIELD**

State  
**NC**

Zip Code  
**27577-8029**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**650.53**

Date of Receipt

**02 / 23 / 2025**

**Transaction ID : SA11A.27714627**

Amount of Each Receipt this Period

**47.00**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, DOROTHY, , ,**

Mailing Address **3044 DOC LINDSEY RD.**

City  
**FORT MEADE**

State  
**FL**

Zip Code  
**33841-9531**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**415.00**

Date of Receipt

**02 / 23 / 2025**

**Transaction ID : SA11A.27715264**

Amount of Each Receipt this Period

**2.08**

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**59.49**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4602 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715310**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715313**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714287**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4603 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAY, ROBIN, , ,**

Mailing Address 5030 SE 41ST AVE

City  
OCALAState  
FLZip Code  
34480-8508FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTHOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713795**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAYBASH, PETER, J., MR., JR.**

Mailing Address 4 CAMBRIDGE DR.

City  
HERSHEYState  
PAZip Code  
17033-2100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714562**

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714002**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4604 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714190**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREMBI, JAMES, , MR.,**

Mailing Address 82 PUTTER DRIVE

City  
PALM COASTState  
FLZip Code  
32164-4700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715101**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714798**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.41



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4605 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714802

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714804

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714806

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4606 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714809

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714816

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUDORF, KENNETH, , ,**

Mailing Address 970 CAPE MARCO DR.

City  
MARCO ISLANDState  
FLZip Code  
34145-6399FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1716.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715415

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

113.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4607 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HACKL, MARK, , ,**

Mailing Address 485 HICKORY NUT AVE

City  
OLDSMARState  
FLZip Code  
34677-2016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713790**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HALL, CATHERINE, , ,**

Mailing Address 6825 GRAND AVE

City  
DOWNERS GROVEState  
ILZip Code  
60516-3652FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715654**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HALL, CATHERINE, , ,**

Mailing Address 6825 GRAND AVE

City  
DOWNERS GROVEState  
ILZip Code  
60516-3652FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

311.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715660**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4608 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANNA, SYLVIA, , ,**

Mailing Address 6109 N GALENA RD

City  
PEORIAState  
ILZip Code  
61614-3605FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715514**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARBER, BARBIE, , ,**

Mailing Address 4910 LAKEWOOD ST

City  
HARRISONState  
MIZip Code  
48625-9645FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715110**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRIS, SUE, , MS.,**

Mailing Address 6768 SPENCER HWY STE A1

City  
PASADENAState  
TXZip Code  
77505-1726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THE HARRIS AGENCYOccupation (for Individual)  
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713709**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

211.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4609 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAYES, DELMORE, G., MR.,**

Mailing Address 81862 SUN CACTUS LN

City  
LA QUINTAState  
CAZip Code  
92253-7745FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.47

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713954**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEATH, DARWIN, , ,**

Mailing Address P.O. BOX 16

City  
SOUTH DENNISState  
MAZip Code  
02660-0016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.81

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714619**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714172**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4610 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714175**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715338**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEDEBY, RICKARD, , MR.,**

Mailing Address 14251 SOUTH 12TH PLACE

City  
PHOENIXState  
AZZip Code  
85048-4404FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INTERTEC INTERNATIONALOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

317.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713766**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4611 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEFFLEBOWER, BARBARA, ANN, MS.,**

Mailing Address 4415 NEGAL CIR

City  
MELBOURNEState  
FLZip Code  
32901-8503FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.82

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713581**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEFFLEBOWER, BARBARA, ANN, MS.,**

Mailing Address 4415 NEGAL CIR

City  
MELBOURNEState  
FLZip Code  
32901-8503FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.82

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713637**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENRY, JAMES, R., MR.,**

Mailing Address 2608 COLLEGE DRIVE

City  
VICTORIAState  
TXZip Code  
77901-4482FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE AND SECURITIES SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.52

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714296**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4612 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENRY, SANDRA, , ,**

Mailing Address 20467 W GOOD HOPE RD

City  
LANNONState  
WIZip Code  
53046-9607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714575**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HESSELEIN, DONALD, , ,**

Mailing Address 4220 ORODAM BLVD E

City  
OROVILLEState  
CAZip Code  
95966-9216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715143**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEWITT, DIANE, , MS.,**

Mailing Address 8299 HEWITT LN

City  
EDISTO ISLANDState  
SCZip Code  
29438-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.92

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715538**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.41



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4613 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIGGINS, MARSHA, , ,**

Mailing Address P.O. BOX 48

City  
VERBANKState  
NYZip Code  
12585-0048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.67

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714306**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOKE, TERRY, , ,**

Mailing Address 811 ELIZABETH ROAD

City  
SAN ANTONIOState  
TXZip Code  
78209-6138FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713742**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOKE, TERRY, , ,**

Mailing Address 811 ELIZABETH ROAD

City  
SAN ANTONIOState  
TXZip Code  
78209-6138FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714048**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4614 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLLAR, KENNETH, , ,**

Mailing Address 120 ALLEGHANY DRIVE

City  
SALISBURYState  
NCZip Code  
28147-7229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715625**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLOBAUGH, JOHN, , ,**

Mailing Address 810 EAST ST

City  
ALTOONAState  
PAZip Code  
16602-5451FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714005**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLLOBAUGH, JOHN, , ,**

Mailing Address 810 EAST ST

City  
ALTOONAState  
PAZip Code  
16602-5451FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

369.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714007**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

41.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4615 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLLOBAUGH, JOHN, , ,**

Mailing Address 810 EAST ST

City  
ALTOONAState  
PAZip Code  
16602-5451FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714011**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HORAN, DONALD, , ,**

Mailing Address P.O. BOX 41

City  
JOHNSONState  
NYZip Code  
10933-0041FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714459**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

334.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715316**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4616 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOWELL, STEVEN, J., MR.,**

Mailing Address 7302 REFLECTION RD CT.

City  
WICHITAState  
KSZip Code  
67205-1623FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KANSAS ORTHOPEDIC CENTEROccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713573

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714262

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBBARD, BARBARA, A., MS.,**

Mailing Address P.O. BOX 1736

City  
LAS CRUCESState  
NMZip Code  
88004-1736FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

734.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713481

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

132.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4617 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUBBART, NANCY, L., MS.,**

Mailing Address 3095 KEY HARBOUR DRIVE

City  
LAKE SAINT LOUISState  
MOZip Code  
63367-2097FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713875

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBBART, NANCY, L., MS.,**

Mailing Address 3095 KEY HARBOUR DRIVE

City  
LAKE SAINT LOUISState  
MOZip Code  
63367-2097FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715027

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUDSON, ROBERT, Y., MR., JR.**

Mailing Address P.O. BOX 370

City  
SEBASTOPOLState  
MSZip Code  
39359-0370FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

228.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713615

Amount of Each Receipt this Period

0.19

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4618 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUGHES, THEO, , ,**

Mailing Address 5502 GLENLIVET PL

City  
GREENVILLEState  
TXZip Code  
75402-4204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.30

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713446**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUNT, SUSAN, , ,**

Mailing Address 522 N CANADIAN TER

City  
MUSTANGState  
OKZip Code  
73064-6105FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.08

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713618**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUNT, SUSAN, , ,**

Mailing Address 522 N CANADIAN TER

City  
MUSTANGState  
OKZip Code  
73064-6105FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.08

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715349**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4619 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713406**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713574**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ISBELL, BETTYE, , ,**

Mailing Address 9806 JOHN ROLFE DR.

City  
SAN ANTONIOState  
TXZip Code  
78230-3212FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713815**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

43.33

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4620 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JACOBS, MICHAEL, , ,

Mailing Address 3 WHITE OAK DR.  
APT CCity  
SMITHFIELDState  
NCZip Code  
27577-4872FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715356

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JEWETT, STEVEN, , ,

Mailing Address 31896 BIRCHWOOD DRIVE

City  
LAKE ELSINOREState  
CAZip Code  
92532-2628FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714934

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JIMENEZ, LARRY, , ,

Mailing Address P O BOX 3089

City  
PLANT CITYState  
FLZip Code  
33563-0001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713734

Amount of Each Receipt this Period

475.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

486.41



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 4621 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSTON, ALICIA, , ,**

Mailing Address 42 OLYMPIA HILLS CIRCLE

City  
LAS VEGASState  
NVZip Code  
89141-6045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FORDEL MARKETING INCOccupation (for Individual)  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713801**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGSState  
IDZip Code  
83276-1671FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713578**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, DEBBIE, , ,**

Mailing Address 3516 CABBAGE PALM WAY

City  
LOXAHATCHEEState  
FLZip Code  
33470-2441FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714935**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4622 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, KARON, , ,**

Mailing Address 1345 165TH ST

City  
FORT SCOTTState  
KSZip Code  
66701-8344FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713861

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713979

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, ODESSA, , ,**

Mailing Address 520-16TH AVE NORTH

City  
NAMPAState  
IDZip Code  
83867-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713843

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4623 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWSState  
TXZip Code  
79714-2010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714483

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAIPIO, JENNIFER, , ,**

Mailing Address 424 E NORTH WATER STREET

City  
CHICAGOState  
ILZip Code  
60611-5511FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MDCOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715354

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAPETANAKIS, GEORGE, J., ,**

Mailing Address 9801TANDEM CT

City  
RALEIGHState  
NCZip Code  
27615-1553FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713438

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4624 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714625

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KENNEDY, MARY, , ,**

Mailing Address 1616 MAPLE AVENUE

City  
NOBLESVILLEState  
INZip Code  
46060-3014FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714212

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEPNER, SPENCER, , ,**

Mailing Address 350 ROYAL VIEW DRIVE

City  
PORT ROYALState  
PAZip Code  
17082-7920FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715241

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4625 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KINNETT, FOREST, , MR.,**

Mailing Address 1012 GLEN DAY DRIVE

City  
CLEMMONS

State  
NC

Zip Code  
27012-9560

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27714275**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIRBY, ERROL, , MR.,**

Mailing Address 2895 TOBIANO DR.

City  
RENO

State  
NV

Zip Code  
89521-8022

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

797.65

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27713836**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOONTZ, LINDA, , ,**

Mailing Address 155 PARKLAND DR

City  
SALISBURY

State  
NC

Zip Code  
28146-8205

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

357.88

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27713789**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

135.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4626 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOVACS, JOHN, , ,**

Mailing Address 234 SOUTH STREET

City  
MEDFIELDState  
MAZip Code  
02052-3106FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.59

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

Transaction ID : SA11A.27713676

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOVACS, JOHN, , ,**

Mailing Address 234 SOUTH STREET

City  
MEDFIELDState  
MAZip Code  
02052-3106FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.59

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

Transaction ID : SA11A.27713683

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOVACS, JOHN, , ,**

Mailing Address 234 SOUTH STREET

City  
MEDFIELDState  
MAZip Code  
02052-3106FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.59

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

Transaction ID : SA11A.27713699

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4627 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.91

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714993**

Amount of Each Receipt this Period

7.29

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KURTI, S., CAROL, ,**

Mailing Address 934 COWEE SCHOOL RD.

City  
FRANKLINState  
NCZip Code  
28734-4524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.68

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715020**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAM, BEN, MINH, MR.,**

Mailing Address 3002 ALBANY CT

City  
WOODBIDGEState  
VAZip Code  
22193-1208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

599.64

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713418**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4628 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAM, BEN, MINH, MR.,**

Mailing Address 3002 ALBANY CT

City  
WOODBIDGEState  
VAZip Code  
22193-1208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.64

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713421**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAM, BEN, MINH, MR.,**

Mailing Address 3002 ALBANY CT

City  
WOODBIDGEState  
VAZip Code  
22193-1208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.64

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713422**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAM, BEN, MINH, MR.,**

Mailing Address 3002 ALBANY CT

City  
WOODBIDGEState  
VAZip Code  
22193-1208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

599.64

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713423**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.21



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4629 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAM, BEN, MINH, MR.,

Mailing Address 3002 ALBANY CT

City  
WOODBIDGEState  
VAZip Code  
22193-1208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713426

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAM, BEN, MINH, MR.,

Mailing Address 3002 ALBANY CT

City  
WOODBIDGEState  
VAZip Code  
22193-1208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713431

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAMPING, DOUG, R., MR.,

Mailing Address 1433 SOUTH 35 EAST

City  
FARMINGTONState  
UTZip Code  
84025-2004FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UDCOccupation (for Individual)  
CO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

494.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714263

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

95.78

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4630 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANCE, TERESA, , ,**

Mailing Address 2004 SIFIELD GREENS WAY

City  
SUN CITY CENTER

State  
FL

Zip Code  
33573-7168

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

**Transaction ID : SA11A.27713480**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANDESMAN, MARIA, A., MRS.,**

Mailing Address 920 PARK AVE. APT. 10A

City  
NEW YORK

State  
NY

Zip Code  
10028-0369

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

**Transaction ID : SA11A.27714651**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANDESMAN, MARIA, A., MRS.,**

Mailing Address 920 PARK AVE. APT. 10A

City  
NEW YORK

State  
NY

Zip Code  
10028-0369

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

**Transaction ID : SA11A.27714747**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4631 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715666

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715667

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715668

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

101.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4632 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.13

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715670**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.13

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715677**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.13

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715678**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4633 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANG, SANDRA, , MRS.,**

Mailing Address 16151 PRAIRIE CREEK BLVD

City  
PUNTA GORDAState  
FLZip Code  
33982-9631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715687**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANTZ, IRENE, L., ,**

Mailing Address 8175 W FARM ROAD 168

City  
REPUBLICState  
MOZip Code  
65738-9327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715042**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LASSEN, ROBERT, , ,**

Mailing Address 7001 FIRTH ROAD

City  
FIRTHState  
NEZip Code  
68358-6209FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715335**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4634 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714346**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715432**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAYCOCK, JAMES, , ,**

Mailing Address 7628 GANNON AVENUE

City  
UNIVERSITY CITYState  
MOZip Code  
63130-2819FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENTERPRISEOccupation (for Individual)  
PART TIME DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714710**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4635 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAYCOCK, JAMES, , ,**

Mailing Address 7628 GANNON AVENUE

City  
UNIVERSITY CITYState  
MOZip Code  
63130-2819FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENTERPRISEOccupation (for Individual)  
PART TIME DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714725**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.06

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713479**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714133**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4636 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWISSMITH, ROSALIND, , MRS.,**

Mailing Address 503 CYPRESS LINKS WAY

City  
TAYLORSState  
SCZip Code  
29687-6473FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714763**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713476**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINDENBERG, LARRY, , MR.,**

Mailing Address 846 DOERFLER DR.

City  
KIMBERLYState  
WIZip Code  
54136-2304FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

592.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715163**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.53



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4637 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINTON, WILLARD, , ,**

Mailing Address 1136 SOUTH QUAIL CREEK ROAD

City  
SKIATOOKState  
OKZip Code  
74070-1747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715073**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LITZAU, JEROME, , ,**

Mailing Address 300 E N SHORE DR. APT 14

City  
HARTLANDState  
WIZip Code  
53029-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713846**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOCKEN, EUGENE, , ,**

Mailing Address 10131 CONCORD DRIVE

City  
RANCHO CUCAMONGAState  
CAZip Code  
91730-4743FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714177**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

244.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4638 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOGSDON, NORMAN , , ,**

Mailing Address 5940 HAVENS TRL

City  
TYLERState  
TXZip Code  
75707-6402FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TIDEWATER MARINEOccupation (for Individual)  
MARINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713673**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LONG, KAREN, , ,**

Mailing Address 300 GREENBRIAT ST

City  
BELTONState  
TNZip Code  
76613-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714808**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LONG, LAURIE, , ,**

Mailing Address 103 EAST CHEYENNE ROAD

City  
COLORADO SPRINGSState  
COZip Code  
80906-2533FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

801.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714197**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

399.35

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4639 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUGO, LEE, , ,**

Mailing Address 3624 CAMPSTONE DRIVE

City  
PLANO

State  
TX

Zip Code  
75023-1011

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

**Transaction ID : SA11A.27715192**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUTHER, ROBERT, , MR.,**

Mailing Address 2201 LAUREL OAK DRIVE

City  
VALENCIA

State  
PA

Zip Code  
16059-8776

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

**Transaction ID : SA11A.27715071**

Amount of Each Receipt this Period

1.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACKEN, PATRICK, , ,**

Mailing Address 25748 AYSEN DRIVE

City  
PUNTA GORDA

State  
FL

Zip Code  
33983-5532

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

**Transaction ID : SA11A.27713872**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4640 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAGRUDER, SHERYL, , ,**

Mailing Address 576 CONCORD LANE

City  
KALISPELLState  
MTZip Code  
59901-5111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1103.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714276**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAKIN, EDYTHE, , ,**

Mailing Address 9735 MOSLEY ROAD

City  
FAIRHOPEState  
ALZip Code  
36532-4441FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714347**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANCHESTER, LINDA, , ,**

Mailing Address 7120 SAN BARTOLO STREET

City  
CARLSBADState  
CAZip Code  
92011-4605FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714164**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4641 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713585**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, BARBARA, , ,**

Mailing Address 607 W CRAFT ST

City  
ROBINSONState  
ILZip Code  
62454-1133FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713674**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

412.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714150**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4642 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715401**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715172**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

832.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714504**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

44.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4643 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASTRO, MABEL, , ,**

Mailing Address 4616 PRAIRIE POINT BOULEVARD

City  
KISSIMMEEState  
FLZip Code  
34746-6364FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

889.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715242**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATHEWS, ASTRIDA, , ,**

Mailing Address 26905 W WAHALLA LN

City  
BUCKEYEState  
AZZip Code  
85396-2337FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713499**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATHESON, MARILYN, , ,**

Mailing Address 1356 JACKSON ST

City  
BELOITState  
WIZip Code  
53511-5914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713934**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4644 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCANN, WILLIAM, R., MR., JR.**

Mailing Address 12909 EAST CASTRO STREET

City  
DEWEYState  
AZZip Code  
86327-8285FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714208**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOAState  
NVZip Code  
89411-1548FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715118**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOAState  
NVZip Code  
89411-1548FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715120**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.44



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4645 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOA

State  
NV

Zip Code  
89411-1548

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27715122**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOA

State  
NV

Zip Code  
89411-1548

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27715124**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCNEILLWEINER, DANA, , ,**

Mailing Address 132 EMERALD BAY

City  
LAGUNA BEACH

State  
CA

Zip Code  
92651-1209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.88

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27714666**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

80.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4646 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCVADON, DIANNA, , ,**

Mailing Address 1800 ADAMS ACRES RD.

City  
SAINT AUGUSTINEState  
FLZip Code  
32084-9300FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714068**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCVADON, DIANNA, , ,**

Mailing Address 1800 ADAMS ACRES RD.

City  
SAINT AUGUSTINEState  
FLZip Code  
32084-9300FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714803**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEIER, CURT, E., MR.,**

Mailing Address 4721 RD 18

City  
LAGRANGEState  
WYZip Code  
82221-8410FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STATE OF WYOOccupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713993**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4647 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MELLINGER, DENNIS, , ,**

Mailing Address 1425 TX HWY 16 NORTH

City  
BANDERAState  
TXZip Code  
78003-0209FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713943**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEREDITH, RANDY, , ,**

Mailing Address 266 BULLFINCH ROAD

City  
MOORESVILLEState  
NCZip Code  
28117-5407FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1978.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714385**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERICLE, DANIEL, V., , SR.**

Mailing Address 11420 SAN JACINTO AVE NE

City  
ALBUQUERQUEState  
NMZip Code  
87112-5527FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

446.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713882**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

222.73

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4648 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, JACK, W., DR.,**

Mailing Address 100 PROFESSIONAL PL STE. 104

City  
CARROLLTON

State  
GA

Zip Code  
30117-3827

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
DEVELOP-BEHAVIORAL PEDIATRICI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**02** / **23** / **2025**

**Transaction ID : SA11A.27713767**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, JAMES, E., ,**

Mailing Address 2235 DEXTER RD.

City  
AUBURN HILLS

State  
MI

Zip Code  
48326-2307

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.37

Date of Receipt

**02** / **23** / **2025**

**Transaction ID : SA11A.27713518**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, JAMES, E., ,**

Mailing Address 2235 DEXTER RD.

City  
AUBURN HILLS

State  
MI

Zip Code  
48326-2307

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

471.37

Date of Receipt

**02** / **23** / **2025**

**Transaction ID : SA11A.27714264**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

136.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4649 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.16

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713748**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELLState  
NMZip Code  
88201-8659FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.16

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713774**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELLState  
NMZip Code  
88201-8659FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.16

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714325**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

39.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4650 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, SHARON, , ,**

Mailing Address 845 ARENDS RIDGE ROAD

City  
MARIETTAState  
OHZip Code  
45750-5337FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715579

Amount of Each Receipt this Period

44.18

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, WILLIAM, , ,**

Mailing Address 131 STEVENS CREEK RD

City  
WAYNESVILLEState  
NCZip Code  
28785-7408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LIFE POINTOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713620

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLS, KENNETH, B., ,**

Mailing Address 110 SAINTSBURY PL

City  
LEXINGTONState  
NCZip Code  
27295-2085FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

836.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714001

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4651 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MINOR, LEE, , ,**

Mailing Address 1590 LUCAS RD

City  
MANSFIELDState  
OHZip Code  
44903-9670FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714121

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONCRIEF, ALICIA, , ,**

Mailing Address 1912 W TULIPTREE DRIVE SE

City  
HUNTSVILLEState  
ALZip Code  
35803-1744FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714508

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONKE, SHEILA, , MS.,**

Mailing Address 12230 COUNTY ROAD P1

City  
NICKERSONState  
NEZip Code  
68044-2595FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AGRICULTURE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

348.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715419

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

253.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4652 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOODY, JO, ANN, ,**

Mailing Address 507 POWER DR.

City  
DUNCANVILLEState  
TXZip Code  
75116-3721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713540

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOODY, JO, ANN, ,**

Mailing Address 507 POWER DR.

City  
DUNCANVILLEState  
TXZip Code  
75116-3721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714351

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORGAN, DAVE, , ,**

Mailing Address 1525 RIVERVIEW DRIVE

City  
HURONState  
SDZip Code  
57350-4209FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

382.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713718

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4653 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORGAN, DAVE, , ,**

Mailing Address 1525 RIVERVIEW DRIVE

City  
HURONState  
SDZip Code  
57350-4209FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.30

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713845**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORGAN, WILLIAM, , ,**

Mailing Address 6103 PARKDALE DRIVE

City  
DALLASState  
TXZip Code  
75227-3614FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.07

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713606**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRIS, ANJALI, , ,**

Mailing Address 863-C SAN PABLO AVENUE

City  
ALBANYState  
CAZip Code  
94706-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

483.56

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714158**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

243.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4654 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOUAT, NANCY, M., MS.,**

Mailing Address 29242 HIGHWAY 127

City  
GREEN RIDGEState  
MOZip Code  
65332-2303FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714299

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MULLER, DONNA, , MS.,**

Mailing Address 295 JUDD RD

City  
MILANState  
MIZip Code  
48160-9585FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713826

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURPHY, STANWOOD, , , JR.**

Mailing Address POB 249

City  
FORTUNAState  
CAZip Code  
95540-0249FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

451.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713870

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4655 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NASH, JANIS, , ,**

Mailing Address 2207 E 11620 S

City  
SANDYState  
UTZip Code  
84092-5668FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713806

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEEDHAM, JIM, , ,**

Mailing Address 9606 SUNNY SIDE RD

City  
WHITMORE LAKEState  
MIZip Code  
48189-9723FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715265

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEWELL, LINDA, , ,**

Mailing Address 4324 SUMMER STAR LANE

City  
FORT WORTHState  
TXZip Code  
76244-4934FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

574.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714216

Amount of Each Receipt this Period

21.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

143.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4656 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NORTHROP, RICHARD, , ,**

Mailing Address 1135 W 4TH AVE

City  
BROOMFIELDState  
COZip Code  
80020-2055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714818**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NORTON, DONALD, W., MR.,**

Mailing Address 1625 LONDON AVE

City  
MANTECAState  
CAZip Code  
95336-7011FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STOCKTON UNIFIED SCHOOL DISTRICTOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715599**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NORTON, DONALD, W., MR.,**

Mailing Address 1625 LONDON AVE

City  
MANTECAState  
CAZip Code  
95336-7011FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STOCKTON UNIFIED SCHOOL DISTRICTOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715600**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.93

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4657 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O'LEARY, GREGORY, , ,**

Mailing Address 1784 N. SAN JOAQUIN STREET

City  
STOCKTON

State  
CA

Zip Code  
95204-6016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
COLLIERS

Occupation (for Individual)  
INDUSTRIAL REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

746.70

Date of Receipt

**02** / **23** / **2025**

**Transaction ID : SA11A.27714344**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ORDWAY, CHRIS, R., MR.,**

Mailing Address 292 ISLAND CREEK DR.

City  
VERO BEACH

State  
FL

Zip Code  
32963-3303

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.20

Date of Receipt

**02** / **23** / **2025**

**Transaction ID : SA11A.27715575**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

**02** / **23** / **2025**

**Transaction ID : SA11A.27714467**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

129.46

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4658 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

**Transaction ID : SA11A.27715223**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PALERMO, MARK, , ,**

Mailing Address 246 GARFIELD PL

City  
BROOKLYN

State  
NY

Zip Code  
11215-2207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
LAWYER, INVESTOR, CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.48

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

**Transaction ID : SA11A.27714886**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKER, REBECCA, , ,**

Mailing Address 2868 ANDREWS DRIVE NORTHWEST

City  
ATLANTA

State  
GA

Zip Code  
30305-2904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

**Transaction ID : SA11A.27713410**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

81.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4659 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARKER, REBECCA, , ,**

Mailing Address 2868 ANDREWS DRIVE NORTHWEST

City  
ATLANTAState  
GAZip Code  
30305-2904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713414**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARKER, REBECCA, , ,**

Mailing Address 2868 ANDREWS DRIVE NORTHWEST

City  
ATLANTAState  
GAZip Code  
30305-2904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713417**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713834**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

128.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 4660 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714073**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713976**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, JOHN, B., MR.,**

Mailing Address 9900 NE 114 TH CIRCLE

City  
VANCOUVERState  
WAZip Code  
98662-1588FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VSNA, LLCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713739**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

127.08



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4661 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PERRY, HUGH, D., MR.,**

Mailing Address 5205 FREDERICKSBURG WAY E

City  
BRENTWOODState  
TNZip Code  
37027-4770FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715413

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRY, LEAH, E., ,**

Mailing Address 313 W FARMER ST. PO BOX 1043

City  
SHARPSBURGState  
NCZip Code  
27878-1043FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE OF NCOccupation (for Individual)  
SCHOOL BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715230

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERRY, LEAH, E., ,**

Mailing Address 313 W FARMER ST. PO BOX 1043

City  
SHARPSBURGState  
NCZip Code  
27878-1043FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE OF NCOccupation (for Individual)  
SCHOOL BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

516.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715232

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

182.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4662 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PERRY, LEAH, E., ,**

Mailing Address 313 W FARMER ST. PO BOX 1043

City  
SHARPSBURGState  
NCZip Code  
27878-1043FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE OF NCOccupation (for Individual)  
SCHOOL BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715235**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRY, NELL, , ,**

Mailing Address 1705 PALMETTO CV

City  
DERIDDERState  
LAZip Code  
70634-5382FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713658**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERS, ELLIE, , ,**

Mailing Address 302 US HWY 385 NORTH

City  
SEMINOLEState  
TXZip Code  
79360-7119FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARM RANCH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

712.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713932**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

181.25

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4663 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PETERS, ELLIE, , ,

Mailing Address 302 US HWY 385 NORTH

City  
SEMINOLEState  
TXZip Code  
79360-7119FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARM RANCH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715467

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETITJEAN, SANDRA, , ,

Mailing Address 6832 TAMARA LANE

City  
ASSARIAState  
KSZip Code  
67416-8875FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714167

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PILKINGTON, CURT, , MR.,

Mailing Address 226 S SECOND ST.

City  
STERLINGState  
COZip Code  
80751-4217FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CURT PILKINGTONOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1024.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713614

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4664 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PILKINGTON, CURT, , MR.,**

Mailing Address 226 S SECOND ST.

City  
STERLINGState  
COZip Code  
80751-4217FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CURT PILKINGTONOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1024.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715083**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIRTLE, BOB, , ,**

Mailing Address 7601 HAMNER LANE

City  
PLANOState  
TXZip Code  
75024-3429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714636**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PISTORINO, MARIA, , MS.,**

Mailing Address 6535 SW 123RD STREET

City  
PINECRESTState  
FLZip Code  
33156-5554FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

983.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713858**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

239.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4665 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PITE, WILLIAM, , ,**

Mailing Address 157 GOOSE LN

City  
GUILFORDState  
CTZip Code  
06437-2100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715329**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713413**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POWELL, SCOTT, , MR.,**

Mailing Address PO BOX 3234

City  
PONTE VEDRA BEACHState  
FLZip Code  
32004-3234FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

518.86

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714712**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4666 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PREMO, TERRY, , ,**

Mailing Address 1409 EVERGREEN PARK DR. SW - 301

City  
OLYMPIAState  
WAZip Code  
98502-5827FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713967**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRICE, JENNIE, , ,**

Mailing Address 9949 N CROOK LN

City  
TUCSONState  
AZZip Code  
85742-8653FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.50

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714574**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RABE, KAREN, , ,**Mailing Address 27285 LAS RAMBLAS  
STE 240City  
MISSION VIEJOState  
CAZip Code  
92691-6325FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.10

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714079**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4667 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REAVES, MARK, , ,**

Mailing Address 13931 NE6TH ST.

City  
WILLISTONState  
FLZip Code  
32696-8769FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714267

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REEVES, BOB, R., MR.,**

Mailing Address 4500 S ROLLING HILLS RD

City  
COLUMBIAState  
MOZip Code  
65201-8828FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

954.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714245

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REEVES, BOB, R., MR.,**

Mailing Address 4500 S ROLLING HILLS RD

City  
COLUMBIAState  
MOZip Code  
65201-8828FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

954.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714255

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

304.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4668 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REEVES, DONALD, E., MR.,**

Mailing Address 230 8TH ST

City  
SEAL BEACHState  
CAZip Code  
90740-6306FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714823**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REYNOLDS, MIKE, , ,**

Mailing Address 370 TIMBER RIDGE DR.

City  
RUSTONState  
LAZip Code  
71270-3578FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REFLECTED GRACEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.50

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714939**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713745**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

302.71



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4669 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLE

State  
NC

Zip Code  
28311-7675

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

**02** / **23** / **2025**

**Transaction ID : SA11A.27714083**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLE

State  
NC

Zip Code  
28311-7675

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

**02** / **23** / **2025**

**Transaction ID : SA11A.27714976**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLE

State  
NC

Zip Code  
28311-7675

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

**02** / **23** / **2025**

**Transaction ID : SA11A.27715069**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4670 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RISLEY, JOHN, , ,**

Mailing Address 63 TOWER ROAD

City  
EDISONState  
NJZip Code  
08820-3512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE TERRACEOccupation (for Individual)  
CATERING MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713902**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBERTSMATSUO, MARY, , ,**

Mailing Address 903 WAIHOLO STREET

City  
HONOLULUState  
HIZip Code  
96821-1225FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714593**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBERTSMATSUO, MARY, , ,**

Mailing Address 903 WAIHOLO STREET

City  
HONOLULUState  
HIZip Code  
96821-1225FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

314.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714767**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4671 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROTH, MARTHA, P., ,**

Mailing Address 7370 APPLERIDGE CT

City  
CINCINNATIState  
OHZip Code  
45247-5031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRIHEALTHOccupation (for Individual)  
R.N.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713490**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713437**

Amount of Each Receipt this Period

2.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713693**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4672 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713857

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714991

Amount of Each Receipt this Period

2.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713473

Amount of Each Receipt this Period

3.96

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4673 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUTLEDGE, JERI, , ,**

Mailing Address 1000 SAHALEE PATH

City  
SAN MARCOSState  
TXZip Code  
78666-7815FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714288**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SADAR, AMELIA, , MS.,**

Mailing Address 1604STONE MANSION DR.

City  
SEWICKLEYState  
PAZip Code  
15143-8601FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.91

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715311**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANBORN, DONALD, , ,**

Mailing Address 10243 ANDANTE CT

City  
LAS VEGASState  
NVZip Code  
89135-2528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714834**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

374.76

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4674 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANFORD, MARCELLA, FRANCIS, MS.,**

Mailing Address 12593 CANBY AVE

City  
FARIBAULTState  
MNZip Code  
55021-7254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715114**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAULSBERRY, GAREN, , ,**

Mailing Address 4440 LONESOME PINE ROAD

City  
LAS CRUCESState  
NMZip Code  
88007-4566FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PERATONOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714680**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHAFLE, MARK, , ,**

Mailing Address PO BOX 572

City  
MINDENState  
NVZip Code  
89423-0572FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715671**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4675 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714134**

Amount of Each Receipt this Period

0.38

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHLOUGH, JAMES, , ,**

Mailing Address 3810 CHURCH HILL

City  
CRYSTAL LAKEState  
ILZip Code  
60014-6511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.20

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714110**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLOUGH, JAMES, , ,**

Mailing Address 3810 CHURCH HILL

City  
CRYSTAL LAKEState  
ILZip Code  
60014-6511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

597.20

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714118**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

44.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4676 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHRANDTHAYWARD, LAURA, , ,**

Mailing Address 545 MATAGUAL

City  
VISTAState  
CAZip Code  
92081-6608FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ADPOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713526

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHWEDA, THOMAS, , ,**

Mailing Address N67W34981

City  
OCONOMOWOCState  
WIZip Code  
53066-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONCEPT MACHINEOccupation (for Individual)  
MACHINE TOOL SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714307

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHWEDA, THOMAS, , ,**

Mailing Address N67W34981

City  
OCONOMOWOCState  
WIZip Code  
53066-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONCEPT MACHINEOccupation (for Individual)  
MACHINE TOOL SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

213.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714415

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.75



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4677 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEGURA, LULA, , ,**

Mailing Address 1001 BROADMOOR BLVD

City  
LAFAYETTEState  
LAZip Code  
70503-5005FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715633**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEITER, JOHN, H., MR.,**

Mailing Address 3293 PADARO LN

City  
CARPINTERIAState  
CAZip Code  
93013-1116FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1166.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713823**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SERBIA, VICTORIA, C., ,**

Mailing Address 4304 HORACE DR. NW

City  
HUNTSVILLEState  
ALZip Code  
35816-3518FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715400**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

168.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4678 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEYLLER, FABIAN, , ,**

Mailing Address 185 BUCKLEY DRIVE

City  
ROCKFORDState  
ILZip Code  
61107-5806FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SFGOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713543**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHAUGHNESSY, KATHLEEN, , ,**

Mailing Address 182 BURNT HICKORY WAY

City  
FORTSONState  
GAZip Code  
31808-4468FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.87

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715126**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHAYS, LORRAINE, , ,**

Mailing Address 14659 CANALVIEW DRIVE APT A

City  
DELRAY BEACHState  
FLZip Code  
33484-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

483.21

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715132**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4679 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715186**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SILVA, MITCHELL, , ,**

Mailing Address 21539 E CRESTRIDGE PLACE

City  
CENTENNIALState  
COZip Code  
80015-3595FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714496**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIMPSON, BARBRA, , ,**

Mailing Address 872 5TH STREET

City  
MANHATTAN BEACHState  
CAZip Code  
90266-6664FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714474**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

194.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4680 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIWIK, DEBORAH, , ,**

Mailing Address 1750 5TH STREET DR. NW

City  
HICKORYState  
NCZip Code  
28601-5206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715160**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLADE, DAVID, , ,**

Mailing Address 11 HIBISCUS DR

City  
PUNTA GORDAState  
FLZip Code  
33950-5034FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EXPORT-IMPORT BANK OF THE USOccupation (for Individual)  
SENIOR COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715156**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLOSEK, GREGORY, , ,**

Mailing Address 755 WALES CT NW APT 20

City  
CONCORDState  
NCZip Code  
28027-0829FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BULWARKOccupation (for Individual)  
EXTERMINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

213.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713652**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

183.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4681 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLOTTERBECK, SCOTT, F., MR.,**

Mailing Address 9034 RAWHIDE WAY

City  
SACRAMENTOState  
CAZip Code  
95826-2113FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SOUND MIXER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714812**

Amount of Each Receipt this Period

34.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, CHRIS, , ,**

Mailing Address 2082 WILLOW BEACH

City  
KEEGO HARBORState  
MIZip Code  
48320-1210FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713986**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, JENNIFER, , ,**

Mailing Address 1210 W STONE MEADOW WAY

City  
SPRINGFIELDState  
MOZip Code  
65810-1609FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COX HEALTHOccupation (for Individual)  
PEDIATRIC NURSE PRACTITIONER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715081**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4682 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, RON, , ,**

Mailing Address P.O. BOX 898

City  
BANNER ELKState  
NCZip Code  
28604-0898FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1028.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714392

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714683

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SNAVELY, MICHAEL, W., MR., SR.**

Mailing Address 67928 US HWY 33

City  
GOSHENState  
INZip Code  
46526-8549FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714606

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

214.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4683 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNOWDEN, JAMES, , MR., III**

Mailing Address 4033 TAMWORTH RD

City  
FORT WORTHState  
TXZip Code  
76116-7337FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1694.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714497

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715643

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STALCUP, NANCY, C., MS.,**

Mailing Address 2461 WEATHERFORD CT

City  
MARIETTAState  
GAZip Code  
30068-3475FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714400

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

103.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4684 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STANFORD, DRUE, , ,**

Mailing Address 323 COUNTY ROAD 112 EAST

City  
PECOSState  
TXZip Code  
79772-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715204**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STANLEY, ERLA, , ,**

Mailing Address 1979 E PIN HIGH DR

City  
FRESNOState  
CAZip Code  
93730-7079FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.52

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715180**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

776.13

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715041**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.03



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4685 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEES, LAURA, , ,**

Mailing Address 3509 HOUCKS MILL RD.

City  
MONKTONState  
MDZip Code  
21111-1703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714322

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEES, LAURA, , ,**

Mailing Address 3509 HOUCKS MILL RD.

City  
MONKTONState  
MDZip Code  
21111-1703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715408

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEIN, HARRIS, , ,**

Mailing Address 2 TODD COURT

City  
HUNTINGTON STATIONState  
NYZip Code  
11746-4224FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714228

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

103.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 4686 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713439**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, STANLEY, S., MR.,**

Mailing Address 5744 REPUBLIC OF TEXAS BLVD

City  
AUSTINState  
TXZip Code  
78735-6512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714196**

Amount of Each Receipt this Period

18.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STIFEL, JOHN, , ,**

Mailing Address 2253 DEBLIN DR.

City  
CINCINNATIState  
OHZip Code  
45239-5609FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

329.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714427**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4687 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STOCKS, LAURENCE, , ,**

Mailing Address 290 SUSSEX PL.

City  
CARSON CITYState  
NVZip Code  
89703-5360FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713485

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOUT, MERLE, , ,**

Mailing Address 13141 W WATERSIDE DR.

City  
BATON ROUGEState  
LAZip Code  
70818-5853FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715171

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714796

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4688 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714801**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714813**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

668.92

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714815**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4689 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714821**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714826**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714830**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4690 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714843

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714900

Amount of Each Receipt this Period

7.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714905

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

44.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4691 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714922

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714925

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

668.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714931

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

92.26



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4692 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRATFORD, DONALD, G., ,**

Mailing Address 6417 TERRAZA PORTICO

City  
CARLSBADState  
CAZip Code  
92009-3046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DGS CONSULTINGOccupation (for Individual)  
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.92

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714940**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STUART, NORMAN, , MR.,**

Mailing Address 4820 LA RINCONADA DRIVE

City  
MIDLOTHIANState  
TXZip Code  
76065-4555FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GUARDIAN PACKAGINGOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714610**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27713970**

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.78



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4693 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714751**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUDOL, JEAN, , ,**

Mailing Address 2640 GATELY DRIVE WEST

City

WEST PALM BEACH

State

FL

Zip Code

33415-7996

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713719**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUDOL, JEAN, , ,**

Mailing Address 2640 GATELY DRIVE WEST

City

WEST PALM BEACH

State

FL

Zip Code

33415-7996

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713990**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.89

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4694 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUNDERLIN, REBECCA, , ,**

Mailing Address 617 GROVE ST.

City  
ULYSSESState  
PAZip Code  
16948-9463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715420**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUTHOFF, JOHN, , ,**

Mailing Address 2665 RALEIGH LAGRANGE

City  
ROSSVILLEState  
TNZip Code  
38066-3442FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715116**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TALLEY, RICHARD, , ,**Mailing Address 2777 PARADISE RD  
3606City  
LAS VEGASState  
NVZip Code  
89109-9126FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714892**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4695 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAQUEY, ANTONY, , MR.,**

Mailing Address P.O. BOX 26544

City  
WINSTON SALEMState  
NCZip Code  
27114-6544FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715571**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAQUEY, ANTONY, , MR.,**

Mailing Address P.O. BOX 26544

City  
WINSTON SALEMState  
NCZip Code  
27114-6544FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715572**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAQUEY, ANTONY, , MR.,**

Mailing Address P.O. BOX 26544

City  
WINSTON SALEMState  
NCZip Code  
27114-6544FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

326.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715573**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4696 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAQUEY, ANTONY, , MR.,**

Mailing Address P.O. BOX 26544

City  
WINSTON SALEMState  
NCZip Code  
27114-6544FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715574

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAQUEY, ANTONY, , MR.,**

Mailing Address P.O. BOX 26544

City  
WINSTON SALEMState  
NCZip Code  
27114-6544FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715576

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TARR, ANNE, , ,**

Mailing Address 13306 SOUTHWALK

City  
SAN ANTONIOState  
TXZip Code  
78232-4843FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

987.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714673

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

182.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4697 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULAState  
MTZip Code  
59804-5849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.60

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715612**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THATCHER, PATRICIA, , ,**

Mailing Address 318 ROSEMARY ST

City  
SMYRNAState  
TNZip Code  
37167-5257FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.34

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715617**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMAS, ALAN, , ,**Mailing Address 3985 MACEACHEN BLVD  
APT 233City  
SARASOTAState  
FLZip Code  
34233-1100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.10

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714106**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4698 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMAS, ALAN, , ,**Mailing Address 3985 MACEACHEN BLVD  
APT 233City  
SARASOTAState  
FLZip Code  
34233-1100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715288

Amount of Each Receipt this Period

11.88

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TONKER, WANDA, B., MS.,**

Mailing Address 436 RIVER RUN DRIVE

City  
PALMYRAState  
VAZip Code  
22963-4251FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714386

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TORRES, HENRY, L., ,**

Mailing Address 4360 ABBOTTS WAY

City  
BIRMINGHAMState  
ALZip Code  
35226-6354FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NETAPPOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714389

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

194.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4699 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRACHTMAN, KAREN, , ,**

Mailing Address 26 SCHERMERHORN ST

City  
BROOKLYNState  
NYZip Code  
11201-4803FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2025

**Transaction ID : SA11A.27714956**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. UMBARGER, BRENDA, L., ,**

Mailing Address P.O. BOX 1774

City  
FRITCHState  
TXZip Code  
79036-1774FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2025

**Transaction ID : SA11A.27713796**

Amount of Each Receipt this Period

23.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN BOMMEL, ROBIN, , ,**

Mailing Address 6205 KHLOE COURT

City  
NINE MILE FALLSState  
WAZip Code  
99026-8319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2025

**Transaction ID : SA11A.27715079**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

150.85

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4700 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTE

State  
FL

Zip Code  
33981-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

**Transaction ID : SA11A.27713946**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTE

State  
FL

Zip Code  
33981-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

**Transaction ID : SA11A.27714441**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VANVALKENBURG, ANN, , ,**

Mailing Address P.O. BOX 1124

City  
PUEBLO

State  
CO

Zip Code  
81002-1124

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANESTHESIA PAIN MANAGEMENT

Occupation (for Individual)  
NURSE ANESTHETIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

**Transaction ID : SA11A.27714552**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4701 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VIDAL, MILLIE, , ,**

Mailing Address 280 ACACIA AVE

City  
SAN BRUNOState  
CAZip Code  
94066-4845FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715527

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WADE, DWIGHT, , ,**

Mailing Address 416 KINGSTON PARK DR.

City  
KNOXVILLEState  
TNZip Code  
37919-6680FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27713744

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAHMAN, GERALD, , ,**

Mailing Address PO BOX 789

City  
ALMAState  
ARZip Code  
72921-0789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

577.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714176

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4702 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALSH, JEANNE, , ,**

Mailing Address 141 BIRKETT STREET

City  
CARBONDALEState  
PAZip Code  
18407-1618FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

638.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714500**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRISTOL MYERS SQUIBBOccupation (for Individual)  
COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715441**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATTS, ELAINE, , ,**

Mailing Address 165 NOVA CIR

City  
ALPINEState  
ALZip Code  
35014-7010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

318.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714686**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 4703 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEATHERMAN, GLENNA, F., ,**

Mailing Address 853 S NEWHAVEN DR.

City  
ORANGEState  
CAZip Code  
92869-5443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713810**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEBER, TIMOTHY, , ,**

Mailing Address 2911 EDMONT LANE

City  
NEDERLANDState  
TXZip Code  
77627-4642FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TENCARVAOccupation (for Individual)  
SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714908**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEBSTER, DANIEL, , ,**

Mailing Address 15724 LAKE HODGE CT

City  
CLERMONTState  
FLZip Code  
34711-9655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOUSE OF REPRESENTATIVESOccupation (for Individual)  
MEMBER OF CONGRESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

692.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713570**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4704 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEBSTER, DENNIS, , ,**

Mailing Address 4916 PICKER DRIVE

City  
PYLESVILLEState  
MDZip Code  
21132-1613FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.43

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27714463

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEHMAN, JOAN, , ,**

Mailing Address 831 HICKORY KNOB CIRCLE

City  
CEDAR HILLState  
TXZip Code  
75104-7803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1670.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715540

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELLS, JOE, , ,**

Mailing Address 207 JULIUS AVENUE

City  
PIKEVILLEState  
KYZip Code  
41501-1739FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MASON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025

Transaction ID : SA11A.27715049

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

178.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4705 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELLS, KESSA, , ,**

Mailing Address 686 LISMORE LANE

City  
NAPLESState  
FLZip Code  
34108-8562FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714910**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713654**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715672**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

132.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4706 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITNEY, WILLIAM, T., MR.,**

Mailing Address 72 ELM ST

City  
SOUTH DARTMOUTHState  
MAZip Code  
02748-3802FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27714266**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITTEN, JAMES, , MR.,**

Mailing Address P.O. BOX 860

City  
MATEWANState  
WVZip Code  
25678-0860FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MODERN ENGEOccupation (for Individual)  
PROJECT COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715319**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIGGINS, JONATHAN, P., MR.,**

Mailing Address 1522 S 18TH ST APT2

City  
LAFAYETTEState  
INZip Code  
47905-2071FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PURDUE UNIVERSITYOccupation (for Individual)  
ELECTRONICS TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715656**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

311.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4707 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, JIMMY, O., MR.,**

Mailing Address 1075 MOTORCOACH DR

City  
POLK CITYState  
FLZip Code  
33868-5113FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.45

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714345**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, JIMMY, O., MR.,**

Mailing Address 1075 MOTORCOACH DR

City  
POLK CITYState  
FLZip Code  
33868-5113FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.45

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714565**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, MICHAEL, , ,**

Mailing Address 126 BRIARWOOD DR.

City  
WINCHESTERState  
VAZip Code  
22603-4403FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SKYEPOINT DECISIONSOccupation (for Individual)  
IT CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27715542**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4708 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOINAROWICZ, KATHLEEN, , ,**

Mailing Address P.O. BOX 22545

City  
MINNEAPOLISState  
MNZip Code  
55422-0545FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.46

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714411**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOINAROWICZ, KATHLEEN, , ,**

Mailing Address P.O. BOX 22545

City  
MINNEAPOLISState  
MNZip Code  
55422-0545FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.46

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714416**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOINAROWICZ, KATHLEEN, , ,**

Mailing Address P.O. BOX 22545

City  
MINNEAPOLISState  
MNZip Code  
55422-0545FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.46

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025**Transaction ID : SA11A.27714434**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.60



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4709 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOINAROWICZ, KATHLEEN, , ,**

Mailing Address P.O. BOX 22545

City  
MINNEAPOLIS

State  
MN

Zip Code  
55422-0545

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.46

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27714436**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOINAROWICZ, KATHLEEN, , ,**

Mailing Address P.O. BOX 22545

City  
MINNEAPOLIS

State  
MN

Zip Code  
55422-0545

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.46

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27714451**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOINAROWICZ, KATHLEEN, , ,**

Mailing Address P.O. BOX 22545

City  
MINNEAPOLIS

State  
MN

Zip Code  
55422-0545

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.46

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27714590**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

78.91

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4710 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOINAROWICZ, KATHLEEN, , ,**

Mailing Address P.O. BOX 22545

City  
MINNEAPOLIS

State  
MN

Zip Code  
55422-0545

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.46

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27714592**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOINAROWICZ, KATHLEEN, , ,**

Mailing Address P.O. BOX 22545

City  
MINNEAPOLIS

State  
MN

Zip Code  
55422-0545

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.46

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27714597**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODBURY, JOHN, B., MR.,**

Mailing Address 875 UNIVERSITY AVE.

City  
SACRAMENTO

State  
CA

Zip Code  
95825-6724

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WOODBURY ACCOUNTANCY CORP.

Occupation (for Individual)  
CERTIFIED PUBLIC ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2025

**Transaction ID : SA11A.27713415**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4711 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WYANDT, YON, , ,**

Mailing Address 3739 SPRING COULEE RD

City  
BELLINGHAMState  
WAZip Code  
98226-8887FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715461**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YATES, HARVEY, E., MR., JR.**

Mailing Address PO BOX 484

City  
ALBUQUERQUEState  
NMZip Code  
87103-0484FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JALAPENO CORPORATIONOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27713572**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZINN, DAVID, D., DR.,**

Mailing Address 720 E 6TH ST

City  
ANNISTONState  
ALZip Code  
36207-5831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NEARMCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

444.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2025**Transaction ID : SA11A.27715303**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

648.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4712 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2025

**Transaction ID : SA11C.27716140**

Amount of Each Receipt this Period

93938.42

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAIR, KIRK, A., ,**

Mailing Address P.O. BOX 1065

City  
FLOYDS KNOBSState  
INZip Code  
47119-1065FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

228.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2025

**Transaction ID : SA11A.27717559**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMS, PAULINE, , ,**

Mailing Address 759 GIRL SCOUT CAMP ROAD

City  
MILL SPRINGState  
NCZip Code  
28756-FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Aggregate Year-to-Date ▼

300.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2025

**Transaction ID : SA11A.27718752**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

61.44

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4713 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADKINS, JANET, , ,**

Mailing Address 3301 JENNINGS DRIVE

City  
SPRINGFIELDState  
ILZip Code  
62704-5536FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718511

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADKINS, MARY, , ,**

Mailing Address 416 SW 725TH RD

City  
CHILHOWEEState  
MOZip Code  
64733-9229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717282

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADKINS, MARY, , ,**

Mailing Address 416 SW 725TH RD

City  
CHILHOWEEState  
MOZip Code  
64733-9229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

796.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717581

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

146.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4714 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADUANA, VEN, , ,**

Mailing Address 29 POLO DRIVE

City  
SOUTH BARRINGTONState  
ILZip Code  
60010-7110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALLIANCE PATHOLOGY CONSULTANTSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716897

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AHLBUM, JONATHAN, , MR.,**

Mailing Address 660 NORTHWEST 42ND AVENUE

City  
COCONUT CREEKState  
FLZip Code  
33066-1632FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE AGENCY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718767

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AHN, ROGER, , ,**

Mailing Address 2807 NORTH 160 STREET

City  
OMAHAState  
NEZip Code  
68116-2061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

373.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718170

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

180.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4715 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717405**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718703**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMSTUTZ, SHERYL, , ,**Mailing Address 1307 S WATER ST  
UNIT 90City  
SILVERTONState  
ORZip Code  
97381-2471FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

866.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718046**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4716 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMYX, PATRICIA, H., MRS.,**

Mailing Address 4382 N ROSEPOINT AVE

City  
MERIDIANState  
IDZip Code  
83646-3702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.31

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716294**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMYX, PATRICIA, H., MRS.,**

Mailing Address 4382 N ROSEPOINT AVE

City  
MERIDIANState  
IDZip Code  
83646-3702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.31

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716441**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANAND, SUNEEL, , ,**

Mailing Address 303 SUNNYSIDE BLVD

City  
PLAINVIEWState  
NYZip Code  
11803-1597FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INTEGRATED BROKERAGE SERVICES INCOccupation (for Individual)  
INSURANCE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718614**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.75



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4717 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CYNNIE, , ,**

Mailing Address 55 RODEO AVENUE # 5

City  
SAUSALITOState  
CAZip Code  
94965-1738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.62

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716762**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CYNNIE, , ,**

Mailing Address 55 RODEO AVENUE # 5

City  
SAUSALITOState  
CAZip Code  
94965-1738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.62

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717019**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.54

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718366**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4718 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDRADE, SOTERO, P., MR.,**

Mailing Address 11660 NEW ALBION WAY

City  
GOLD RIVERState  
CAZip Code  
95670-8150FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ANDRADE ELECT. INC.Occupation (for Individual)  
ELECT. CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717944**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANSARI, AMIR, H., MR.,**

Mailing Address 1981 PARK CHASE LN NE

City  
ATLANTAState  
GAZip Code  
30324-2738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717148**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. APEL, RONALD, H., MR.,**

Mailing Address 2345 2ND AVE NW

City  
CULLMANState  
ALZip Code  
35058-0470FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
APEL STEELOccupation (for Individual)  
STEEL FABRICATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717653**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

203.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4719 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AULD, LORNA, , ,**

Mailing Address 4154 N

City  
BOISEState  
IDZip Code  
83704-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718360**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAILEY, WANDA, , ,**

Mailing Address 112 SOUTH 10TH AVE

City  
TEAGUEState  
TXZip Code  
75860-1724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716609**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAILEY, WANDA, , ,**

Mailing Address 112 SOUTH 10TH AVE

City  
TEAGUEState  
TXZip Code  
75860-1724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716629**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

207.22

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4720 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BALTHASER, MARY ANN, , ,**

Mailing Address 26 LITTLEJOHN LN

City  
ROCKLEDGEState  
FLZip Code  
32955-2411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717337

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARBER, WILLIAM, , ,**

Mailing Address 408 COLLEGE AVE

City  
WEST CHESTERState  
PAZip Code  
19382-3556FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BUCKEYE PARTNERSOccupation (for Individual)  
PIPELINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718539

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARBIN, LOUIS, , ,**

Mailing Address 132 ROYAL LN

City  
POOLERState  
GAZip Code  
31322-3958FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718751

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4721 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARBIN, LOUIS, , ,**

Mailing Address 132 ROYAL LN

City  
POOLERState  
GAZip Code  
31322-3958FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718756**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARBIN, LOUIS, , ,**

Mailing Address 132 ROYAL LN

City  
POOLERState  
GAZip Code  
31322-3958FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718757**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARILLARO, MARYANN, , MS.,**Mailing Address 130 WATER ST  
APT 1ACity  
NEW YORKState  
NYZip Code  
10005-1622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

681.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718622**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4722 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARNES, KYLE, , ,**

Mailing Address P.O. BOX 141

City  
JACKSON SPRINGSState  
NCZip Code  
27281-0141FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MEADOW CREEK TILEOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716914**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEACHAM, PAM, D., ,**

Mailing Address 4100 ST. IVES BLVD.

City  
SPRING HILLState  
FLZip Code  
34609-3185FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718793**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BECKER, WILLIAM, , MR.,**

Mailing Address 200 ORCHARD TRACE DRIVE

City  
LEXINGTONState  
VAZip Code  
24450-4052FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717583**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

243.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4723 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEE, DONNA, , ,**

Mailing Address 3002 MANOR CT N

City  
DENTONState  
TXZip Code  
76210-8344FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717972**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEIGHT, MARY, , ,**

Mailing Address 2442 RADCLIFFE AVE

City  
INDIANAPOLISState  
INZip Code  
46227-8655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.85

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716748**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEIGHT, MARY, , ,**

Mailing Address 2442 RADCLIFFE AVE

City  
INDIANAPOLISState  
INZip Code  
46227-8655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.85

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717298**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4724 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEIGHT, MARY, , ,**

Mailing Address 2442 RADCLIFFE AVE

City  
INDIANAPOLISState  
INZip Code  
46227-8655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.85

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718795**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BELL, SAMUEL, , ,**

Mailing Address 3825 SWEET MAGNOLIA DR.

City  
GAINESVILLEState  
GAZip Code  
30504-5949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.64

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718358**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BELL, SAMUEL, , ,**

Mailing Address 3825 SWEET MAGNOLIA DR.

City  
GAINESVILLEState  
GAZip Code  
30504-5949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.64

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718362**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.39



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4725 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BELL, SAMUEL, , ,**

Mailing Address 3825 SWEET MAGNOLIA DR.

City  
GAINESVILLEState  
GAZip Code  
30504-5949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718369**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BELL, SAMUEL, , ,**

Mailing Address 3825 SWEET MAGNOLIA DR.

City  
GAINESVILLEState  
GAZip Code  
30504-5949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718370**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BELL, SAMUEL, , ,**

Mailing Address 3825 SWEET MAGNOLIA DR.

City  
GAINESVILLEState  
GAZip Code  
30504-5949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718401**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.82

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4726 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BELL, SAMUEL, , ,**

Mailing Address 3825 SWEET MAGNOLIA DR.

City  
GAINESVILLE

State  
GA

Zip Code  
30504-5949

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.64

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27718515**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BELLUCHIE, LAURENCE, , ,**

Mailing Address 1910 TOWN CENTER BLVD

City  
ANNAPOLIS

State  
MD

Zip Code  
21401-3598

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.32

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27717841**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BENSON, ELIZABETH, , ,**

Mailing Address 200 N OCEAN BLVD  
9N

City  
DELRAY BEACH

State  
FL

Zip Code  
33483-7178

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

655.94

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27717864**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

130.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4727 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERMAN, SANDRA, , ,**

Mailing Address 80 OLYMPIA CHASE DRIVE

City  
LAS VEGASState  
NVZip Code  
89141-6039FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716387**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERRY, JOHN, , ,**

Mailing Address 15825 OLD OLEANDER DR

City  
CHARLOTTEState  
NCZip Code  
28278-5005FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716517**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERTOLUCCI, LAWRENCE, E., MR.,**

Mailing Address 272 SAVANNAH DR.

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-7903FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

503.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717429**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4728 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACKSTONE, MICHAEL, , ,**

Mailing Address 2358 RIVERSIDE AVEVILLA RIVA 106

City  
JACKSONVILLEState  
FLZip Code  
32204-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MICHAEL BLACKSTONEOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717969

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLANKENSHIP , KATHY , , ,**

Mailing Address 125 ORCHARD DR.

City  
ELIDAState  
OHZip Code  
45807-1084FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716584

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLUMEL, GEORGE, , ,**

Mailing Address 316 NORTH COUNTRY CLUB DRIVE

City  
LAKE WORTHState  
FLZip Code  
33462-1002FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718328

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

98.90

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4729 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOGGS, JOHN, R., MR.,

Mailing Address 3900 RAILWAY AVENUE

City  
EVERETTState  
WAZip Code  
98201-3840FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DEEP SEA FISHERIESOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717830

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City  
STAUNTONState  
VAZip Code  
24401-6287FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
HORSE BOARDING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716563

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BORNHEIMER, JIM, , ,

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716660

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

116.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4730 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717048**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOROS, ELSIE, I., MRS.,**

Mailing Address 3432 MEADOW WOODS DR.

City  
BIRMINGHAMState  
ALZip Code  
35216-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717985**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUCHARD, HELEN, M., ,**

Mailing Address 2310 WEDDINGTON CT

City  
ROCKLINState  
CAZip Code  
95765-4643FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717425**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4731 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUCHER, PAUL, , ,**

Mailing Address 551 SW SANCTUARY DR.

City  
PORT SAINT LUCIEState  
FLZip Code  
34986-2043FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IWTOccupation (for Individual)  
PRESIDENT AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.90

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718582**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, PAMELA, , ,**

Mailing Address 3703 LAKE EDGE DRIVE

City  
SUWANEEState  
GAZip Code  
30024-7415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.72

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717183**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BREITBACH, PAUL, , ,**

Mailing Address 320 BUCKINGHAM RD

City  
WINSTON SALEMState  
NCZip Code  
27104-4027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

286.29

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717571**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4732 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROCK, KENNETH, , ,**

Mailing Address 408 N 9TH STREET

City  
NEW BADENState  
ILZip Code  
62265-1137FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.50

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718684**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROCK, KENNETH, , ,**

Mailing Address 408 N 9TH STREET

City  
NEW BADENState  
ILZip Code  
62265-1137FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.50

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718688**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROCK, KENNETH, , ,**

Mailing Address 408 N 9TH STREET

City  
NEW BADENState  
ILZip Code  
62265-1137FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

533.50

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718689**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4733 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROCK, KENNETH, , ,**

Mailing Address 408 N 9TH STREET

City  
NEW BADENState  
ILZip Code  
62265-1137FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718691**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, BENNY, , ,**

Mailing Address 4338 NORTH CHAPEL ROAD

City  
FRANKLINState  
TNZip Code  
37067-7816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716445**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, SHARMAN, , MS.,**

Mailing Address 110 CLIFF ST

City  
CORDOVAState  
ALZip Code  
35550-1216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2819.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716657**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4734 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRUMBAUGH, PHILIP, C., MR.,**

Mailing Address 108 PHILIP DR

City  
WEST MILTONState  
OHZip Code  
45383-1330FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.19

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716243**

Amount of Each Receipt this Period

80.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUNTYN, ZELLA, D., MS.,**

Mailing Address 3746 HWY 43 N.

City  
BRANDONState  
MSZip Code  
39047-8253FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.94

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718021**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURNS, MICHAEL, J., ,**

Mailing Address 7287 HORIZON DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.44

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717596**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4735 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURNS, MICHAEL, J., ,**

Mailing Address 7287 HORIZON DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717603**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUSTARD, ANN, , ,**

Mailing Address 4512 GREENVIEW RD.

City  
TRENT WOODSState  
NCZip Code  
28562-7634FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716558**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUTCHER, HAROLD, , ,**

Mailing Address 17979 W FAIRVIEW ST

City  
GOODYEARState  
AZZip Code  
85338-6309FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717155**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

301.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4736 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BYERS, JOHN, , ,**

Mailing Address 2590 NORTH KINGS HIGHWAY

City  
FORT PIERCEState  
FLZip Code  
34951-4019FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MANUFACTURING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718070**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAFFREY, PETER, , ,**

Mailing Address 4 BRIARCLIFF ROAD

City  
MORRIS PLAINSState  
NJZip Code  
07950-2907FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.87

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717111**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAFFREY, PETER, , ,**

Mailing Address 4 BRIARCLIFF ROAD

City  
MORRIS PLAINSState  
NJZip Code  
07950-2907FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221.87

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717125**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4737 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAREY, JAMES, , ,**

Mailing Address 2929 N. WEST AVE.

City  
FRESNOState  
CAZip Code  
93705-3902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JAGUAR APARTMENTSOccupation (for Individual)  
LANDLORD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717159

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARLSON, CYNTHIA, , ,**

Mailing Address 1404 HONEY LN

City  
KOKOMOState  
INZip Code  
46902-3920FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717724

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARLSON, SUSAN, , ,**

Mailing Address 16058 W. CAMBRIDGE AVE.

City  
GOODYEARState  
AZZip Code  
85395-2081FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHASEOccupation (for Individual)  
BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716320

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4738 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718806**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716240**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716264**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4739 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716269**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716793**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717549**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

44.95

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4740 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDEN

State  
AL

Zip Code  
35901-4055

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICE

Occupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27718537**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARR, HARLEY, , MR.,**

Mailing Address 17011 CEDAR PLZ APT 6C

City  
OMAHA

State  
NE

Zip Code  
68130-2379

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27717485**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARR, HARLEY, , MR.,**

Mailing Address 17011 CEDAR PLZ APT 6C

City  
OMAHA

State  
NE

Zip Code  
68130-2379

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

482.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27718786**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

89.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4741 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARY, KATHARINE, L., MRS.,**

Mailing Address 276 NORTHLAKE DR.

City  
COLDWATERState  
MIZip Code  
49036-8661FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716862**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAUSSEAU, MILAGROS, , ,**

Mailing Address 1925 VICTOR BROWN ROAD

City  
TALLAHASSEEState  
FLZip Code  
32303-7552FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DEPARTMENT REVENUE AND KELLER WILLIAMSOccupation (for Individual)  
OPERATIONAL ANALYST AND REAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717629**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAYCE, RICHARD, , ,**

Mailing Address 5801 NAPLES DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-2306FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718410**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

243.20

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4742 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHAMBERLIN, CLINT, , ,**

Mailing Address 1519 5TH AVENUE WEST

City  
WILLISTON

State  
ND

Zip Code  
58801-3903

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.98

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27717193**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHASE, RICHARD, , ,**

Mailing Address 2370 YORK ROAD, SUITE C4

City  
JAMISON

State  
PA

Zip Code  
18929-1031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHASE & ASSOCIATES, INC.

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27716309**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHERAMIE, EDMOND, , ,**

Mailing Address 119 WEST 26TH STREET

City  
LAROSE

State  
LA

Zip Code  
70373-2514

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27716472**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

189.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4743 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHRISTIAN, CLAUDIA, , ,**

Mailing Address 406 SOUTH 43RD ST.

City  
PHILADELPHIAState  
PAZip Code  
19104-3935FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716330

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CIACCIO, JANE, , ,**Mailing Address 5491 BEECHMONT AVE  
APT 506City  
CINCINNATIState  
OHZip Code  
45230-1160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

841.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718470

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716432

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

118.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4744 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717867**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, CHARLES, , ,**

Mailing Address 522 CLYDESDALE DRIVE

City  
NEW HOPEState  
PAZip Code  
18938-5816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717732**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLEMENTS, ASHLEY, , ,**

Mailing Address 3950 WHEELER ROAD

City  
BAY CITYState  
MIZip Code  
48706-1857FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CLEMENTS CONTRACTINGOccupation (for Individual)  
OFFICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.90

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717340**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4745 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COKER, RUTH, J., MS.,**

Mailing Address P.O. BOX 814

City  
ROOSEVELTState  
AZZip Code  
85545-0814FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716509

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLINS, CAROLE, , ,**

Mailing Address 5715 IVES PL.

City  
RIVERSIDEState  
CAZip Code  
92506-3541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716778

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLUCCI, MARYLOU, , ,**

Mailing Address 127 BAYVIEW LN

City  
STATEN ISLANDState  
NYZip Code  
10309-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

344.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717157

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4746 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716763**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONSTANTINE, RUSSELL, , ,**

Mailing Address 209 ROBIN HOOD DR

City  
COVINGTONState  
LAZip Code  
70433-4762FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717736**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COOK, CHARLES, , ,**

Mailing Address 31 OCEAN REEF DR.

C101-194

City  
KEY LARGOState  
FLZip Code  
33037-5282FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718770**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4747 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COPELAND, LAMMOT, , ,**

Mailing Address P.O. BOX 1992

City  
WILMINGTONState  
DEZip Code  
19899-1992FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ASSOCIATES INTERNATIONALOccupation (for Individual)  
BUS.EXEC.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717316**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CORMIER, WILLIAM, , MR.,**

Mailing Address 1025 MAIN ST

City  
LEOMINSTERState  
MAZip Code  
01453-1909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718264**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORNTHWAITE, SHARON, , ,**

Mailing Address BOX 23

City  
STORYState  
WYZip Code  
82842-0023FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717323**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

247.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4748 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORTNER, DIANE, , ,**

Mailing Address 4849 FLORIDA AVE NORTH

City  
MINNEAPOLISState  
MNZip Code  
55428-4609FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718230**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COURTZ, RANDY, , ,**

Mailing Address 315 WEST ELLIOT ROAD

City  
TEMPEState  
AZZip Code  
85284-1328FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WEICHERT REALTORSOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717696**

Amount of Each Receipt this Period

150.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COWHEY, DENNIS, , ,**

Mailing Address 11861 MISTY ARBOR RUN

City  
FORT MYERSState  
FLZip Code  
33913-9417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

233.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718569**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

195.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4749 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COWHEY, DENNIS, , ,**

Mailing Address 11861 MISTY ARBOR RUN

City  
FORT MYERSState  
FLZip Code  
33913-9417FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718573**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716865**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIG, JUDY, , ,**

Mailing Address 4206 S. CANTAMAR DRIVE

City  
SAINT GEORGEState  
UTZip Code  
84790-4862FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

353.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718804**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4750 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CROSBY, HAZELMAY, M., MS.,**

Mailing Address 1518 W 2500 N

City  
VERNALState  
UTZip Code  
84078-9639FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.71

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717590**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CROZIER, MARILYN, , ,**

Mailing Address 11928 FARWELL ROAD

City  
PHILADELPHIAState  
PAZip Code  
19154-3419FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.22

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718780**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CULBERT, JOSEPH, , ,**

Mailing Address 155 PRESCOTT AVE

City  
STATEN ISLANDState  
NYZip Code  
10306-3216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716546**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4751 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CULBERTSON, LLOYD, , ,**

Mailing Address 10705S SW 69TH CT.

City  
PINECRESTState  
FLZip Code  
33156-3932FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2025

**Transaction ID : SA11A.27718082**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CUMMINGS, MARK, , ,**

Mailing Address 409 ARNO ST SE

City  
ALBUQUERQUEState  
NMZip Code  
87102-3559FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2025

**Transaction ID : SA11A.27718664**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAHLBERG, NANCY, , MRS.,**

Mailing Address 208 PONDEROSA PINE DR

City  
BLUE EYEState  
MOZip Code  
65611-8244FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INTERIOR DESIGNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

501.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2025

**Transaction ID : SA11A.27718047**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4752 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAHLBERG, NANCY, , MRS.,**

Mailing Address 208 PONDEROSA PINE DR

City  
BLUE EYEState  
MOZip Code  
65611-8244FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INTERIOR DESIGNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718329**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DALMAN, RONALD, , ,**

Mailing Address 701 RETREST DRIVE 137

City  
NAPLESState  
FLZip Code  
34110-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717080**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DALMAN, RONALD, , ,**

Mailing Address 701 RETREST DRIVE 137

City  
NAPLESState  
FLZip Code  
34110-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717081**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4753 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DALMAN, RONALD, , ,**

Mailing Address 701 RETREST DRIVE 137

City  
NAPLESState  
FLZip Code  
34110-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717087**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DANNA, JOSEPH, , ,**

Mailing Address 610 CROSS CREEK RD

City  
AVELLAState  
PAZip Code  
15312-2214FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718624**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717399**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4754 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAVIS, CLAUDE, A., ,**

Mailing Address 6752 TAYLOR WOODS LN

City  
PLEASANT GARDENState  
NCZip Code  
27313-8139FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

RETAIL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.41

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716448**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAVIS, CLAUDE, A., ,**

Mailing Address 6752 TAYLOR WOODS LN

City  
PLEASANT GARDENState  
NCZip Code  
27313-8139FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

RETAIL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.41

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716452**

Amount of Each Receipt this Period

10.67

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAVIS, NANCY, , ,**

Mailing Address 9410 SE 174TH LOOP

City  
SUMMERFIELDState  
FLZip Code  
34491-6457FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

459.32

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717346**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4755 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAVIS, PATRICIA, , ,**

Mailing Address 4 BARBARAS WAY

City  
JACKSONState  
NJZip Code  
08527-6410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718534

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAWSON, STEPHEN, , ,**

Mailing Address 19032 W PINNACLE CIR.

City  
BATON ROUGEState  
LAZip Code  
70810-8906FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ISOMAG CORPOccupation (for Individual)  
FOUNDER CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716221

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEATS, WAYNE, , ,**

Mailing Address 2000 SNOWDROP DR.

City  
BAKERSFIELDState  
CAZip Code  
93311-3764FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

596.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718272

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

157.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4756 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718045**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718093**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEGRISSELLES, JANET, , ,**

Mailing Address 14638 SAGAMORE COURT

City  
FORT MYERSState  
FLZip Code  
33908-4912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

426.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718118**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4757 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEGRISSELLES, JANET, , ,**

Mailing Address 14638 SAGAMORE COURT

City  
FORT MYERS

State  
FL

Zip Code  
33908-4912

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27718371**

Amount of Each Receipt this Period

17.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEL ROSSO, NITA, , ,**

Mailing Address 3244 E WICKIEUP LN

City  
PHOENIX

State  
AZ

Zip Code  
85050-7915

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27718740**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DENHOFF, DIANE, K., ,**

Mailing Address 1908 STATE ROUTE 19

City  
WELLSVILLE

State  
NY

Zip Code  
14895-9740

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27716292**

Amount of Each Receipt this Period

1.88

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

94.38

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4758 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DENHOFF, DIANE, K., ,**

Mailing Address 1908 STATE ROUTE 19

City  
WELLSVILLEState  
NYZip Code  
14895-9740FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.26

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716307**

Amount of Each Receipt this Period

3.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIAS PINTO, CHERYL, , ,**

Mailing Address 4831 S KILPATRICK AVENUE

City  
CHICAGOState  
ILZip Code  
60632-4828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.69

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717676**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIBARTOLOMEO, BETTY, M., MS.,**

Mailing Address 135 OAKMONT CIR.

City  
PINEHURSTState  
NCZip Code  
28374-8342FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.74

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717185**

Amount of Each Receipt this Period

20.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

29.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4759 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIPASQUALE, KRISTOFFER, , ,**

Mailing Address 37 WOODROW STREET

City  
HUDSONState  
MAZip Code  
01749-2811FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716666**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOLAN, WILLIAM, , ,**

Mailing Address 125 TOWPATH LN

City  
ROCHESTERState  
NYZip Code  
14618-4511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716769**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOLAN, WILLIAM, , ,**

Mailing Address 125 TOWPATH LN

City  
ROCHESTERState  
NYZip Code  
14618-4511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716830**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4760 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOWNING, CRAIG, , ,**

Mailing Address P.O. BOX 160

City  
BEAVERState  
OKZip Code  
73932-0160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RETAIL GROCER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717673**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRINNON, PAUL, T., MR.,**

Mailing Address 9346 KATHI CREEK DR.

City  
COLORADO SPRINGSState  
COZip Code  
80924-2110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716549**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUFFY, GERARD, , ,**

Mailing Address 39 BAYBERRY LN

City  
MIDDLETOWNState  
NJZip Code  
07748-1424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

801.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717357**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4761 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUFFY, GERARD, , ,**

Mailing Address 39 BAYBERRY LN

City  
MIDDLETOWNState  
NJZip Code  
07748-1424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718023**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUFFY, GERARD, , ,**

Mailing Address 39 BAYBERRY LN

City  
MIDDLETOWNState  
NJZip Code  
07748-1424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718347**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUGAS, ROLAND, , MR.,**

Mailing Address 408 ELYSIAN FIELDS DR

City  
LAFAYETTEState  
LAZip Code  
70508-6058FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717335**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4762 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUVALL, LARRY, , ,**

Mailing Address 28435 N74 TH ST

City  
SCOTTSDALEState  
AZZip Code  
85266-2167FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KLK INCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718098**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EACK, CRYSTAL, , ,**

Mailing Address 691 IONE AVENUE NORTHEAST

City  
SPRING LAKE PARKState  
MNZip Code  
55432-1146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717669**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EASOW, BABU, , ,**

Mailing Address 29 INDIAN RUN

City  
EAST QUOGUEState  
NYZip Code  
11942-4947FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716595**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

345.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4763 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718769

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EASTMAN, STEVEN, , ,**

Mailing Address 6848 N GOVERNMENT WAY 114

City

DALTON GARDENS

State

ID

Zip Code

83815-7799

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716460

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EASTMAN, STEVEN, , ,**

Mailing Address 6848 N GOVERNMENT WAY 114

City

DALTON GARDENS

State

ID

Zip Code

83815-7799

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717494

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4764 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EBERLY, RENEE, , ,**

Mailing Address 10430 EBERLY RANCH RD

City  
CHAPPELL HILLState  
TXZip Code  
77426-5380FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.32

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718107**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EBNER, EILEEN, , ,**

Mailing Address 14 ALGIERS LANE

City  
CHEEKTOWAGAState  
NYZip Code  
14225-4704FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.18

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718131**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EDGINGTON, CAROL, L., ,**

Mailing Address 5580 TAMBERLANE CIR.

City  
PALM BCH GDNSState  
FLZip Code  
33418-4107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

819.43

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716672**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.81



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4765 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMMONS, VICTORIA, , ,**

Mailing Address 142 GILES AVE

City  
MIDDLESEXState  
NJZip Code  
08846-1901FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WHOLE FOODS MARKETOccupation (for Individual)  
SHOPPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717188

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMMONS, VICTORIA, , ,**

Mailing Address 142 GILES AVE

City  
MIDDLESEXState  
NJZip Code  
08846-1901FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WHOLE FOODS MARKETOccupation (for Individual)  
SHOPPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717687

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMMONS, VICTORIA, , ,**

Mailing Address 142 GILES AVE

City  
MIDDLESEXState  
NJZip Code  
08846-1901FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WHOLE FOODS MARKETOccupation (for Individual)  
SHOPPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718841

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4766 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718731**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718738**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EVANS, JULIE, A., MS.,**

Mailing Address 420 DESERT AIRE DR. SW

City  
MATTAWAState  
WAZip Code  
99349-1961FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WGEOccupation (for Individual)  
APPLE FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718240**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4767 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EVANS, LINDA, , ,**

Mailing Address 130 CRESCENT AVE. #306

City  
SUNNYVALEState  
CAZip Code  
94087-2765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716142

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EVANS, LINDA, , ,**

Mailing Address 130 CRESCENT AVE. #306

City  
SUNNYVALEState  
CAZip Code  
94087-2765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716143

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EVANS, LINDA, , ,**

Mailing Address 130 CRESCENT AVE. #306

City  
SUNNYVALEState  
CAZip Code  
94087-2765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716694

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4768 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FANKHOUSER, JERRY, W., MR.,**

Mailing Address 920 KINZUA RD

City  
WARRENState  
PAZip Code  
16365-9627FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.15

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716224**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FASSNACHT, MARILYN, , ,**

Mailing Address 119 COFFEE MILL CREEK ROAD

City  
GEORGETOWNState  
TXZip Code  
78633-6015FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.88

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718478**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FAULL, DONNA, M., ,**

Mailing Address 502EAST SUMMIT STREET

City  
NORMALState  
ILZip Code  
61761-1430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.38

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718002**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4769 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FINDLAY, PEGGIE, A., DR.,**

Mailing Address 5314 EAKES ROAD NW

City  
LOS RANCHOSState  
NMZip Code  
87107-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27717927

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISCHER, STEPHEN, M., MR.,**

Mailing Address 17520 LAKESEDGE TRAIL

City  
CHAGRIN FALLSState  
OHZip Code  
44023-2115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.05

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27716690

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISCHER, STEPHEN, M., MR.,**

Mailing Address 17520 LAKESEDGE TRAIL

City  
CHAGRIN FALLSState  
OHZip Code  
44023-2115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

832.05

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27717199

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

137.05

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4770 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISCHER, STEPHEN, M., MR.,**

Mailing Address 17520 LAKESEDGE TRAIL

City  
CHAGRIN FALLS

State  
OH

Zip Code  
44023-2115

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.05

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27718807**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFF

State  
AZ

Zip Code  
86005-8967

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.05

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27716794**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLEMING, ROBERT, , ,**

Mailing Address 204 PAINSWUICKLN

City  
DOWNINGTOWN

State  
PA

Zip Code  
19335-1705

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.06

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27718334**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

85.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4771 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLORY, BILL, , ,**

Mailing Address 1965 WINCHESTER ROAD

City  
CULDESACState  
IDZip Code  
83524-5531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718825**

Amount of Each Receipt this Period

950.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FOX, NORM, , ,**

Mailing Address 1200 VIRGINIA AVE

City  
LAKEWOODState  
OHZip Code  
44107-2431FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BHP MANAGEMENTOccupation (for Individual)  
HEALTHCARE MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718646**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716339**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1038.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4772 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FREIDENRICH, ROBERT, G., MR.,**

Mailing Address 820 NORTH DR.

City  
BRICKState  
NJZip Code  
08724-4816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIO COMPRESSION SYSTEMS - SELFOccupation (for Individual)  
RWGR/BUS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717968**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRUGE, RUBY, JOYCE, ,**

Mailing Address 2004 HIGHWAY 103

City  
PORT BARREState  
LAZip Code  
70577-5310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

751.25

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716520**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FULLER, JOHN, D., MR.,**

Mailing Address 279 TOURNAMENT LN.

City  
FREEPORTState  
FLZip Code  
32439-6241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

920.02

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718018**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1030.98



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4773 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLAGHER, MARY, , MRS.,**

Mailing Address 647 CHEVY CHASE CIR

City  
SUGAR LANDState  
TXZip Code  
77478-3601FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.34

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718670**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALLO, WILLIAM, , ,**

Mailing Address 347 6TH ST

City  
BROOKLYNState  
NYZip Code  
11215-3301FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718743**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GARLICK, KAREN, , ,**

Mailing Address 6481 N. LEAD AVENUE

City  
FRESNOState  
CAZip Code  
93711-1028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

697.13

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718161**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4774 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILMORE, KEN, , ,**

Mailing Address 807 HAMPSHIRE RD

City  
DREXEL HILLState  
PAZip Code  
19026-1615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717504**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIORDANO, MICHAEL, , ,**

Mailing Address 59 YOWAGO AVE

City  
BRANFORDState  
CTZip Code  
06405-5526FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIORDANOOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3029.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717271**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIORDANO, MICHAEL, , ,**

Mailing Address 59 YOWAGO AVE

City  
BRANFORDState  
CTZip Code  
06405-5526FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIORDANOOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3029.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717484**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4775 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716400**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716430**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716837**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4776 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOMBERG, GALINA, , ,**

Mailing Address 96 CARRICK CIR.

City  
HAYWARDState  
CAZip Code  
94542-7912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1414.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716302**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOMBERG, GALINA, , ,**

Mailing Address 96 CARRICK CIR.

City  
HAYWARDState  
CAZip Code  
94542-7912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1414.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716306**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOMBERG, GALINA, , ,**

Mailing Address 96 CARRICK CIR.

City  
HAYWARDState  
CAZip Code  
94542-7912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1414.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716442**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

157.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4777 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GONZALEZ, MARCILIO, , ,**

Mailing Address 753 WESTCHESTER DR.

City  
CORPUS CHRISTIState  
TXZip Code  
78408-2818FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AIR LIQUIDEOccupation (for Individual)  
PIPELINE TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.18

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718783**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOOCH, DOUG, , ,**

Mailing Address 323 SCHRIMSHER

City  
MADISONState  
ALZip Code  
35758-7836FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.16

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718710**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, LOUISE, , ,**

Mailing Address 4075 BROOKS MILL DRIVE

City  
LITHONIAState  
GAZip Code  
30038-4143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1230.59

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717588**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4778 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAHAM, BILL, , ,**

Mailing Address 9917 EASTHAVEN BLVD

City  
HOUSTONState  
TXZip Code  
77075-3201FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716992

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAY, ROBIN, , ,**

Mailing Address 5030 SE 41ST AVE

City  
OCALAState  
FLZip Code  
34480-8508FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTHOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718074

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREAVES, ROGER, F., MR.,**

Mailing Address 9964 E. REFLECTING MOUNTAIN WAY

City  
SCOTTSDALEState  
AZZip Code  
85262-2884FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HEALTH NETOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1249.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717937

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

607.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4779 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, CALVIN, , ,**

Mailing Address 1601 LEXINGTON RD

City  
PLEASANT HILLState  
MOZip Code  
64080-1123FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LSR7Occupation (for Individual)  
BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718567**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREENWOOD, KEITH, , ,**

Mailing Address 1250 S SANDBRANCH

City  
MOUNT HOPEState  
WVZip Code  
25880-9068FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PLUMBER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.56

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718709**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, MARJORIE, , ,**

Mailing Address 4312 BAYOU RIDGE DRIVE

City  
PACEState  
FLZip Code  
32571-8647FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.31

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718819**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4780 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREGORY, ALAN, W., ,**

Mailing Address 4524 INDIAN CABIN TER

City  
HAMMONTONState  
NJZip Code  
08037-3915FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718660**

Amount of Each Receipt this Period

16.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREINER, MICHAEL, J., ,**

Mailing Address PO BOX 621

City  
MARSTONS MILLSState  
MAZip Code  
02648-0621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717475**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREINER, MICHAEL, J., ,**

Mailing Address PO BOX 621

City  
MARSTONS MILLSState  
MAZip Code  
02648-0621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

945.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718238**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4781 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718455

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718456

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718458

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13.18

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4782 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKE

State  
IN

Zip Code  
46303-0776

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27718459**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKE

State  
IN

Zip Code  
46303-0776

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27718461**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKE

State  
IN

Zip Code  
46303-0776

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27718467**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

16.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4783 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROUND, JIM, , ,**

Mailing Address 9791 E DREYFUS AVE

City  
SCOTTSDALEState  
AZZip Code  
85260-4450FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.83

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718745**

Amount of Each Receipt this Period

20.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROVER, KAREN, , ,**

Mailing Address 925 COLORADO ST

City  
MARSEILLESState  
ILZip Code  
61341-1241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.22

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718747**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUETTLER, DOUG, , ,**

Mailing Address 818 WILLOW STREET

City  
KING CITYState  
CAZip Code  
93930-3319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CWSOccupation (for Individual)  
SM SYS OPR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717918**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

134.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4784 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUIDA, LISA, , ,**

Mailing Address 1175 PARK AVE

City  
NEW YORKState  
NYZip Code  
10128-1211FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718476**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUM, GAYLE, , MS.,**

Mailing Address 509 VISTA CV

City  
VICTORIAState  
TXZip Code  
77904-1310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRADY BEARINGOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717066**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMILTON, BILL, , ,**

Mailing Address 7713 KOLMAR AVE

City  
SKOKIEState  
ILZip Code  
60076-3654FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718141**

Amount of Each Receipt this Period

0.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.84

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4785 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAMLIN, DENNIS, , ,

Mailing Address 18735 CORSINI DRIVE

City  
SAN ANTONIOState  
TXZip Code  
78258-1629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716878

Amount of Each Receipt this Period

16.14

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HANNA, TIMOTHY, , ,

Mailing Address 159 PROSPECT ST

City  
FRAMINGHAMState  
MAZip Code  
01701-4826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718714

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARBER, BARBIE, , ,

Mailing Address 4910 LAKEWOOD ST

City  
HARRISONState  
MIZip Code  
48625-9645FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

372.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718499

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

169.22

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4786 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARMON, DON, , ,**

Mailing Address 1717 EPPING AVE

City  
MODESTOState  
CAZip Code  
95355-7859FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716161**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRAH, TONY, , ,**

Mailing Address 355 BOXINGTON WAY

City  
SPARKSState  
NVZip Code  
89434-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2456.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717945**

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRYMAN, CHARLOTTE, , ,**

Mailing Address 16415 WAGON WHEEL DRIVE

City  
RIVERSIDEState  
CAZip Code  
92506-5849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

421.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718690**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1124.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4787 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAVERLY, VICTOR, , ,**

Mailing Address 307 ALISO ST

City  
VENTURAState  
CAZip Code  
93001-2103FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HAVERLY SYSTEMS INCOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716553**

Amount of Each Receipt this Period

3000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAYWOOD, DAVID, , ,**

Mailing Address 415 BLUE POINT ROAD

City  
CLEAR LAKE SHORESState  
TXZip Code  
77565-2365FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716738**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENDRICK, THOMAS, , ,**

Mailing Address 3601 TWIN LAKES WAY

City  
PLANOState  
TXZip Code  
75093-7538FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TCH PARTNERS, LLCOccupation (for Individual)  
PRES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717325**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3174.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4788 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENLEY, DOY, B., MR.,**

Mailing Address 14251 MIMOSA LANE

City  
TUSTINState  
CAZip Code  
92780-2334FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6843.04

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716985**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENLEY, DOY, B., MR.,**

Mailing Address 14251 MIMOSA LANE

City  
TUSTINState  
CAZip Code  
92780-2334FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6843.04

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717195**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENLEY, DOY, B., MR.,**

Mailing Address 14251 MIMOSA LANE

City  
TUSTINState  
CAZip Code  
92780-2334FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6843.04

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717941**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

420.25



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4789 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENTHORN, JIM, , ,**

Mailing Address 242 COUNTY HIGHWAY 183 NORTH

City  
DEFUNIAK SPRINGSState  
FLZip Code  
32433-4394FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716541**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERROLD, BARBARA, J., MRS.,**

Mailing Address 3738 MARSBELLA PL

City  
KALAMAZOOState  
MIZip Code  
49006-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
K O PRODUCTSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718758**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HICKS, JERRY, , ,**

Mailing Address 1261 DENALI DR, #146

City  
FESTUSState  
MOZip Code  
63028-2382FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

609.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717645**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

128.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4790 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716966

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716973

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716974

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

129.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4791 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716975

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716978

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716979

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4792 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717149**

Amount of Each Receipt this Period

60.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717520**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOKE, TERRY, , ,**

Mailing Address 811 ELIZABETH ROAD

City  
SAN ANTONIOState  
TXZip Code  
78209-6138FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716192**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4793 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLDEN, MICHAEL, , ,**

Mailing Address 1609 E 10TH ST

City  
SUPERIORState  
WIZip Code  
54880-3464FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ASBOccupation (for Individual)  
SALES ASSOCIATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718555**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLINGTON, MARGARET, , ,**

Mailing Address 9960 ATRIUM WAY APT 514

City  
JACKSONVILLEState  
FLZip Code  
32225-6447FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717292**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLMQUIST, RICHARD, , MR.,**

Mailing Address 6113 E. BOSTON ST.

City  
MESAState  
AZZip Code  
85205-8321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

243.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716253**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

209.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4794 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOPKINS, GEORGE, , ,**

Mailing Address 135 CR 2984

City  
HUGHES SPRINGSState  
TXZip Code  
75656-6715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.85

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716468**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HORVATH, LINDA, , ,**

Mailing Address P.O. BOX 34688

City  
INDIANAPOLISState  
INZip Code  
46234-0688FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

745.41

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716614**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOWELL, STEVEN, J., MR.,**

Mailing Address 7302 REFLECTION RD CT.

City  
WICHITAState  
KSZip Code  
67205-1623FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KANSAS ORTHOPEDIC CENTEROccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

349.04

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716392**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4795 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOY, BARBARA, , ,**

Mailing Address 206 BRECKS LN

City  
WILMINGTONState  
DEZip Code  
19807-3011FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.30

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718682**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBBARD, BARBARA, A., MS.,**

Mailing Address P.O. BOX 1736

City  
LAS CRUCESState  
NMZip Code  
88004-1736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.41

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716953**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBBARD, BARBARA, A., MS.,**

Mailing Address P.O. BOX 1736

City  
LAS CRUCESState  
NMZip Code  
88004-1736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

734.41

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717407**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4796 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUDSPETH, WILLIAM, , ,**

Mailing Address 605 HILLVIEW PLACE

City  
LEESBURGState  
VAZip Code  
20175-5095FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717058

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUMPHRIES, CATHY, , ,**

Mailing Address 972 E SEA BISCUIT WAY

City  
WASHINGTONState  
UTZip Code  
84780-3024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718173

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUMPHREYS, DIANA, L., ,**

Mailing Address 310 CYPRESS HILL LN.

City  
RIDGEVILLEState  
SCZip Code  
29472-8817FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

272.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716822

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.73



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4797 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUNT, GRAHAM, , ,**

Mailing Address 4950 CENTRAL APT 1101

City  
KANSAS CITYState  
MOZip Code  
64112-2589FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.44

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716265**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUNT, SUSAN, , ,**

Mailing Address 522 N CANADIAN TER

City  
MUSTANGState  
OKZip Code  
73064-6105FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.08

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716710**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUSTAD, JANET, , ,**

Mailing Address 51806 PELICAN POINT DRIVE

City  
DETROIT LAKESState  
MNZip Code  
56501-9405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

898.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716963**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4798 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUSTAD, JANET, , ,**

Mailing Address 51806 PELICAN POINT DRIVE

City  
DETROIT LAKESState  
MNZip Code  
56501-9405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

898.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716969**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ISBELL, BETTYE, , ,**

Mailing Address 9806 JOHN ROLFE DR.

City  
SAN ANTONIOState  
TXZip Code  
78230-3212FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.65

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716601**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ISBELL, BETTYE, , ,**

Mailing Address 9806 JOHN ROLFE DR.

City  
SAN ANTONIOState  
TXZip Code  
78230-3212FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.65

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716618**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

56.95

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4799 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ISBELL, BETTYE, , ,**

Mailing Address 9806 JOHN ROLFE DR.

City  
SAN ANTONIO

State  
TX

Zip Code  
78230-3212

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27716678**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAICKS, DANIEL, , ,**

Mailing Address 298 ANGEL OAK DR

City  
BONNEAU

State  
SC

Zip Code  
29431-4001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27718681**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRING

State  
TX

Zip Code  
77389-7885

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27717355**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

46.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4800 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JENNINGS, CHARLES, , ,**

Mailing Address 12323 BUTTERBROOK LANE

City  
FORT WAYNEState  
INZip Code  
46818-8517FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717885**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JENNINGS, PAULA, , ,**

Mailing Address 122 QUAIL RUN DR.

City  
WARNER ROBINSState  
GAZip Code  
31088-6504FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.25

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717686**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOBLIN, NANCY, , ,**

Mailing Address 19540 SANDRIDGE WAY

City  
LEESBURGState  
VAZip Code  
20176-8286FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.55

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716522**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4801 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, DELORES, A., MS.,**

Mailing Address 18 MUIRFIELD VILLAGE CT.

City  
SUMMERVILLEState  
SCZip Code  
29483-5093FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.05

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716856**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, DELORES, A., MS.,**

Mailing Address 18 MUIRFIELD VILLAGE CT.

City  
SUMMERVILLEState  
SCZip Code  
29483-5093FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.05

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716866**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, DELORES, A., MS.,**

Mailing Address 18 MUIRFIELD VILLAGE CT.

City  
SUMMERVILLEState  
SCZip Code  
29483-5093FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

488.05

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716887**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4802 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, DOYLE, , ,**

Mailing Address 11648 CAMINITO CORRIENTE

City  
SAN DIEGOState  
CAZip Code  
92128-4540FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FAMILY PHYSICIAN M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716829**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, TERRY, D., MR.,**

Mailing Address 110 DALTON AVE.

City  
LA JUNTAState  
COZip Code  
81050-1352FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717521**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWSState  
TXZip Code  
79714-2010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716849**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

67.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4803 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWSState  
TXZip Code  
79714-2010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716867

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, VICKI, , MS.,**

Mailing Address 4 SAGE CIR

City  
ANDREWSState  
TXZip Code  
79714-2010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718181

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOYNER, JERRY, , ,**

Mailing Address 8705 FALCON VIEW DR

City  
MCKINNEYState  
TXZip Code  
75072-6701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

356.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717886

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4804 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718694**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718695**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718696**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

51.13

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4805 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718697

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718698

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718699

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4806 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718700

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718701

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAVAL, KATHLEEN, , ,**

Mailing Address 1596 WANTAGH AVE.

City  
WANTAGHState  
NYZip Code  
11793-3902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717674

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4807 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717593

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEMP, REGINA, , ,**

Mailing Address 135 FOXHOLLIES BLVD

City  
BESSEMERState  
ALZip Code  
35022-5026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718375

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KENDALL, GAIL, , ,**

Mailing Address P.O. BOX 2706

City  
RANCHO SANTA FEState  
CAZip Code  
92067-2706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716858

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

146.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4808 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KENNEDY, MARY, , ,**

Mailing Address 1616 MAPLE AVENUE

City  
NOBLESVILLEState  
INZip Code  
46060-3014FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.43

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716698**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KENNEDY, MARY, , ,**

Mailing Address 1616 MAPLE AVENUE

City  
NOBLESVILLEState  
INZip Code  
46060-3014FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.43

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716803**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KENNEDY, MARY, , ,**

Mailing Address 1616 MAPLE AVENUE

City  
NOBLESVILLEState  
INZip Code  
46060-3014FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221.43

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717577**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4809 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KIBBY, LEROY, , ,**

Mailing Address 4816 S 154TH PLZ

City  
OMAHAState  
NEZip Code  
68137-5165FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718661

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIRBY, ERROL, , MR.,**

Mailing Address 2895 TOBIANO DR.

City  
RENOState  
NVZip Code  
89521-8022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

797.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717152

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNOWLES, KAREN, , ,**

Mailing Address 308 GRAVES DRIVE

City  
FORESTState  
VAZip Code  
24551-2622FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTRA HEALTHOccupation (for Individual)  
SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

794.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717138

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4810 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716166**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOVACS, JOHN, , ,**

Mailing Address 234 SOUTH STREET

City  
MEDFIELDState  
MAZip Code  
02052-3106FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716743**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOVACS, JOHN, , ,**

Mailing Address 234 SOUTH STREET

City  
MEDFIELDState  
MAZip Code  
02052-3106FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716759**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

42.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4811 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOVAC, KAY, , ,**

Mailing Address 340 NORTH HOOD ST

City  
LAKE PROVIDENCEState  
LAZip Code  
71254-2140FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EAST CARROLL HOSPITALOccupation (for Individual)  
MEDICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.32

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718637**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUJAWA, LEONARD, , ,**

Mailing Address 2660 PEACHTREE RD APT 15B

City  
ATLANTAState  
GAZip Code  
30305-3676FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.10

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718282**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAHAM, JAMIL, , ,**

Mailing Address 6702 BALMORAL OVERLOOK

City  
NEW MARKETState  
MDZip Code  
21774-6952FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.41

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718417**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

134.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4812 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAHAM, JAMIL, , ,**

Mailing Address 6702 BALMORAL OVERLOOK

City  
NEW MARKETState  
MDZip Code  
21774-6952FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.41

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27718427

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANDES, SHARON, L., ,**

Mailing Address 8174 VISTA DR.

City  
LA MESAState  
CAZip Code  
91941-6430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.79

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27717437

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27717519

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

132.87



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4813 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAWVER, BILL, R., MR.,**

Mailing Address 8070 GRANITE OAKS DR.

City  
GRANITE BAYState  
CAZip Code  
95746-9530FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718377

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716285

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716312

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

116.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4814 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, RICHARD, T., MR.,**

Mailing Address P.O. BOX 2113

City  
ORLANDOState  
FLZip Code  
32802-2113FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

901.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717518**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718719**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEONARD, ANNE, , ,**

Mailing Address 13202 HUNTERS SPRING

City  
SAN ANTONIOState  
TXZip Code  
78230-2862FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

AHA

Occupation (for Individual)

SMA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

317.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718025**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

168.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4815 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LESAFFRE, MARY, , ,**

Mailing Address 2186 OCEAN BLVD

City  
RYEState  
NHZip Code  
03870-2741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5080.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718497

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LESSY JR, ROY, , ,**

Mailing Address 64 BLACKPOOL RD

City

REHOBOTH BEACH

State

DE

Zip Code

19971-3511

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717780

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEWISSMITH, ROSALIND, , MRS.,**

Mailing Address 503 CYPRESS LINKS WAY

City

TAYLORS

State

SC

Zip Code

29687-6473

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

913.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718065

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4816 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWISSMITH, ROSALIND, , MRS.,**

Mailing Address 503 CYPRESS LINKS WAY

City  
TAYLORSState  
SCZip Code  
29687-6473FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718071

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEWISSMITH, ROSALIND, , MRS.,**

Mailing Address 503 CYPRESS LINKS WAY

City  
TAYLORSState  
SCZip Code  
29687-6473FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718072

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEYSHON, DAVID, W., MR.,**

Mailing Address 1608 HONEYSUCKLE CT

City  
WEST CHESTERState  
PAZip Code  
19380-4361FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALMARTOccupation (for Individual)  
SHELF STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

703.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716451

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

171.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4817 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINTON, WILLARD, , ,**

Mailing Address 1136 SOUTH QUAIL CREEK ROAD

City  
SKIATOOKState  
OKZip Code  
74070-1747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718436**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LITZAU, JEROME, , ,**

Mailing Address 300 E N SHORE DR. APT 14

City  
HARTLANDState  
WIZip Code  
53029-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717850**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOCKHART, ROBERT, , MR.,**

Mailing Address 79140 BIG HORN TRAIL

City  
LA QUINTAState  
CAZip Code  
92253-4522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REVENUE ENHANCEMENT GROUPOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717079**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4818 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOWRY, RANDY, K., MR.,**

Mailing Address 15914 RATHLIN CT

City  
SPRINGState  
TXZip Code  
77379-6887FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNION GASOccupation (for Individual)  
OIL AND GAS SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716877**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUCAS, CHARLOTTE, M., MS.,**

Mailing Address 302 N SHERIDAN ST

City  
CORONAState  
CAZip Code  
92878-4067FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LUCAS OIL PRODUCTS INCOccupation (for Individual)  
EXEC VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716519**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUCK, JOHN, , ,**

Mailing Address 38638 BOAT HOUSE DR.

City  
MURRIETAState  
CAZip Code  
92563-2583FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

319.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717703**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4819 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUGO, LEE, , ,**

Mailing Address 3624 CAMPSTONE DRIVE

City  
PLANOState  
TXZip Code  
75023-1011FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717739

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUNDIN, LEROY, , ,**

Mailing Address 28 CHATHAM CT

City  
CROSSVILLEState  
TNZip Code  
38558-2622FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717364

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUNDQUIST, DENNIS, , MR.,**

Mailing Address 14342 HILL PRINCE

City  
SAN ANTONIOState  
TXZip Code  
78248-1131FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FPM REMEDIATIONS, INC.Occupation (for Individual)  
CIVIL ENVIRONMENTAL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718338

Amount of Each Receipt this Period

24.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4820 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACCRACKEN, GREGORY, , ,**

Mailing Address 60 RED CEDAR DR.

City  
ROCHESTERState  
NYZip Code  
14616-1666FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716971

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACHASKEE, ALEX, , ,**

Mailing Address 25330 PENSHURST DRIVE

City  
BEACHWOODState  
OHZip Code  
44122-1384FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716382

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACHASKEE, ALEX, , ,**

Mailing Address 25330 PENSHURST DRIVE

City  
BEACHWOODState  
OHZip Code  
44122-1384FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716383

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

104.80



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4821 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACHASKEE, ALEX, , ,**

Mailing Address 25330 PENSHURST DRIVE

City  
BEACHWOOD

State  
OH

Zip Code  
44122-1384

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27716386**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACHASKEE, ALEX, , ,**

Mailing Address 25330 PENSHURST DRIVE

City  
BEACHWOOD

State  
OH

Zip Code  
44122-1384

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27716405**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACHADO, LEONARD, , ,**

Mailing Address 21520 G YORBA LINDA BLVD

City  
YORBA LINDA

State  
CA

Zip Code  
92887-3764

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27716754**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

119.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4822 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACOMBER, RICHARD, , ,**

Mailing Address 3727 SE 17TH AVENUE

City  
CAPE CORALState  
FLZip Code  
33904-5068FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718281**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MADDOX, MARTHA, , ,**

Mailing Address 5722 HOLLY HILL CIRCLE

City  
DALLASState  
TXZip Code  
75231-5314FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ARAPAHO EAST INCOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716343**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MALUKAS, DAIVA, , ,**

Mailing Address 8130 LAKE RIDGE DR.

City  
BURR RIDGEState  
ILZip Code  
60527-5975FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HMDOccupation (for Individual)  
V.P

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

920.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717296**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

382.25

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4823 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MANNO, JOHN, , ,

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716984

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MANNO, JOHN, , ,

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716991

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANTHEI, LEAH, , MS.,

Mailing Address 46646 COUNTY ROAD 613

City  
NASHWAUKState  
MNZip Code  
55769-4515FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716545

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

70.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4824 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARSH, BETH, , MRS.,**

Mailing Address 209 E PINE ST

City  
STRAFFORDState  
MOZip Code  
65757-9427FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
B. AND B. SALES CO.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716207**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARSHALL, RONALD, H., ,**

Mailing Address 1990 N US 23

City  
HARRISVILLEState  
MIZip Code  
48740-9777FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717230**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, FRED, , ,**

Mailing Address 9146 N 15TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

354.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716227**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4825 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTINSON, RODNEY, , ,**

Mailing Address 13531 W SKY HAWK DR.

City  
SUN CITY WESTState  
AZZip Code  
85375-5832FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.99

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717853**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718500**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASTERS, CARLTON , , ,**

Mailing Address 2127 BRICKELL AVENUE

City  
MIAMIState  
FLZip Code  
33129-2100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GOODWORKS INTERNATIONALOccupation (for Individual)  
DIPLOMAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

531.50

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717240**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

183.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4826 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCASHLAN, TIMOTHY, , ,**

Mailing Address 4932 MORGANS CREEK COURT

City  
CARMELState  
INZip Code  
46033-8182FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDWARD JONESOccupation (for Individual)  
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717627

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCANN, WILLIAM, R., MR., JR.**

Mailing Address 12909 EAST CASTRO STREET

City  
DEWEYState  
AZZip Code  
86327-8285FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717064

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCLELLAN, JOHN, , ,**

Mailing Address 13456 HIGHWAY 1

City  
SHREVEPORTState  
LAZip Code  
71115-9424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718625

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4827 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCLLENATHAN, STEPHEN, , ,**

Mailing Address 1423 HERKIMER STEET

City  
HOUSTONState  
TXZip Code  
77008-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717640**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCORKLE, ANN, G., ,**

Mailing Address P.O.BOX 8152

City  
CHARLESTONState  
WVZip Code  
25303-0152FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718100**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCRAY, GREGORY, C., MR.,**

Mailing Address 4604 YELLOW ROSE TRAIL

City  
AUSTINState  
TXZip Code  
78749-1670FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

407.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716491**

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4828 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCRAY, GREGORY, C., MR.,**

Mailing Address 4604 YELLOW ROSE TRAIL

City  
AUSTINState  
TXZip Code  
78749-1670FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716492

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCRAY, GREGORY, C., MR.,**

Mailing Address 4604 YELLOW ROSE TRAIL

City  
AUSTINState  
TXZip Code  
78749-1670FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716494

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCDONALD, PATRICK, , ,**

Mailing Address 134N FIRST ST. STE 201

City  
BRIGHTONState  
MIZip Code  
48116-1264FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PATRICK A MCDONALD.Occupation (for Individual)  
ARBITRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718393

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.93



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4829 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCGAVOCK, VICKI, , ,**

Mailing Address 4004 109TH ST

City  
LUBBOCKState  
TXZip Code  
79423-0880FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718299**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCLEOD, PATTY, , ,**

Mailing Address 248 EAGLE RIDGE RD

City  
ALTOState  
NMZip Code  
88312-8017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716820**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOAState  
NVZip Code  
89411-1548FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717755**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.09

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4830 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOA

State  
NV

Zip Code  
89411-1548

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27717757**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOA

State  
NV

Zip Code  
89411-1548

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27717767**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOA

State  
NV

Zip Code  
89411-1548

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27717768**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

71.85

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4831 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOA

State  
NV

Zip Code  
89411-1548

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27717770**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOA

State  
NV

Zip Code  
89411-1548

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27717775**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MELCHER, STEPHEN, , ,**

Mailing Address 2013 OKMULGEE LN

City  
CROSSVILLE

State  
TN

Zip Code  
38572-3439

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27717092**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

155.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4832 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MELENDEZ, LUIS, , ,**

Mailing Address 12TIRRELLST#2

City  
WORCESTERState  
MAZip Code  
01603-2653FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717992**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MENDENHALL, MICHAEL, , ,**

Mailing Address PO BOX 201703

City  
ANCHORAGEState  
AKZip Code  
99520-1703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717007**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. METZGER, AGNES, , ,**Mailing Address 888 PARK AVENUE  
2CCity  
NEW YORKState  
NYZip Code  
10075-0282FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1259.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716750**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

215.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4833 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. METZGER, AGNES, , ,**Mailing Address 888 PARK AVENUE  
2CCity  
NEW YORKState  
NYZip Code  
10075-0282FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1259.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718235

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, ANNE, , ,**

Mailing Address 6 RONNA RD

City  
GLOUCESTERState  
MAZip Code  
01930-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1006.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717353

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, ANNE, , ,**

Mailing Address 6 RONNA RD

City  
GLOUCESTERState  
MAZip Code  
01930-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1006.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717382

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

147.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4834 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, COLLEEN, , ,**

Mailing Address 5400 LIKINI ST, APT. 303

City  
HONOLULUState  
HIZip Code  
96818-1731FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HAWAIIAN ELECTRICOccupation (for Individual)  
RATE ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716715**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, JAMES, E., ,**

Mailing Address 2235 DEXTER RD.

City  
AUBURN HILLSState  
MIZip Code  
48326-2307FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716203**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELLState  
NMZip Code  
88201-8659FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716968**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.87

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4835 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELL

State  
NM

Zip Code  
88201-8659

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.16

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27717690

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, RONALD, , ,**

Mailing Address 2303 W. 27TH STREET

City  
ROSWELL

State  
NM

Zip Code  
88201-8659

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.16

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27717974

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLS, KENNETH, B., ,**

Mailing Address 110 SAINTSBURY PL

City  
LEXINGTON

State  
NC

Zip Code  
27295-2085

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

836.95

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27716718

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

38.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4836 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MINA, BRUCE, , ,**

Mailing Address 555 BROADHOLLOW ROAD STE 404

City  
MELVILLEState  
NYZip Code  
11747-5001FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MINA LLANO HIGGINS GROUP LLPOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717371**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MISITANO, ANTHONY, , ,**

Mailing Address 12 MAYBELLE COURT

City  
MECHANICSBURGState  
PAZip Code  
17050-8516FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PAM HEALTHOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717756**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718519**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.75



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4837 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718542**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOODY, EVAN, E., MR.,**

Mailing Address 26 CHERRY HILLS FARM DR.

City  
ENGLEWOODState  
COZip Code  
80113-7165FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MOODY INSURANCE AGENCYOccupation (for Individual)  
INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718822**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOORE, JOHN, , ,**

Mailing Address 2251 MARINA AVE

City  
LIVERMOREState  
CAZip Code  
94550-9027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717317**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

330.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4838 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOORE, ROBERT, L., ,**

Mailing Address 13994 NEWBERG

City  
CAT SPRINGState  
TXZip Code  
78933-5237FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718139

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOSER, ROBIN, , ,**

Mailing Address 348 BURR COURT

City  
FORT MILLState  
SCZip Code  
29715-0162FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717451

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOTOVICH, BORIS, , ,**

Mailing Address 1100 CONEY ISLAND AVE

City  
BROOKLYNState  
NYZip Code  
11230-2342FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718323

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4839 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, DAVE, , MR.,**

Mailing Address 1206 W TYSON ST

City  
CHANDLERState  
AZZip Code  
85224-4323FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TIMES MICROWAVE SYSTEMSOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717938**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURRAY, JAMES, , ,**

Mailing Address 135 SUNSHINE DR.

City  
PACIFICAState  
CAZip Code  
94044-1125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717636**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUSICK, PEGGY, , ,**

Mailing Address 4804 YAUPON CIR

City  
MYRTLE BEACHState  
SCZip Code  
29575-4508FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

512.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718632**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4840 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUSSER, FRED, , MR.,**

Mailing Address 4480 CRYSTAL DR

City  
BROOMFIELDState  
COZip Code  
80023-8138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717416**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NAMORATO, MICHAEL, , ,**

Mailing Address 129 LAKEWAY DR.

City  
OXFORDState  
MSZip Code  
38655-9600FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717567**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEAT, KAREN, , ,**

Mailing Address 2002 APPLESEED DR

City  
ALLENState  
TXZip Code  
75013-4894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

816.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716939**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4841 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSEN, PATRICIA, , ,**

Mailing Address 10026 LLEWELLYN COURT

City  
FAIRFAXState  
VAZip Code  
22032-2713FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DODOccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.30

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718453**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, FRED, E., MR.,**Mailing Address 900 TAMIAMI TRL S  
APT 534City  
VENICEState  
FLZip Code  
34285-3627FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.18

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718530**

Amount of Each Receipt this Period

20.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NGUYEN, TOAN, , ,**

Mailing Address 472 ILCREST DR.

City  
HOUSTONState  
TXZip Code  
77042-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.42

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717895**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4842 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NICHOLS, PHIL, , ,**

Mailing Address 407 WEST CORNELL STREET

City  
AVON PARKState  
FLZip Code  
33825-3700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1266.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718616

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIEMEYER, GARY, L., MR.,**

Mailing Address 8370 AUBURN RD

City  
AUBURNState  
ILZip Code  
62615-9264FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716570

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NIEVES, NANCY, , ,**

Mailing Address 130 GLEN BEIGH RUN

City  
TYRONEState  
GAZip Code  
30290-1873FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FCBOEOccupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

246.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717363

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

226.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4843 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOYES, RITA, S., MRS.,**

Mailing Address 4070 FOUNDERS CLUB DR.

City  
SARASOTAState  
FLZip Code  
34240-1441FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.60

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717849**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O'CARROLL, JAMES, , ,**

Mailing Address 2304 BERTEAU DR.

City  
WAKE FORESTState  
NCZip Code  
27587-8042FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717881**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'CARROLL, JAMES, , ,**

Mailing Address 2304 BERTEAU DR.

City  
WAKE FORESTState  
NCZip Code  
27587-8042FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717889**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4844 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OAK, ALAN, , MR.,**

Mailing Address 5104 BONHAM RD

City  
OXFORDState  
OHZip Code  
45056-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717709**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, BEVERLY, , MRS.,**

Mailing Address 200 IDLE HOUR DR

City  
MACONState  
GAZip Code  
31210-4702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
1842 INNOccupation (for Individual)  
BED AND BREAKFAST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716579**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSAR, KAREN, , ,**

Mailing Address 821 WYNDEMERE WAY

City  
NAPLESState  
FLZip Code  
34105-7167FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718109**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

198.90



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4845 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OTHOLD, CHARLES, W., MR.,**Mailing Address 5632 VAN NUYS BLVD  
#5City  
VAN NUYSState  
CAZip Code  
91401-4602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOCKHEED MARTIN AERONAUTICSOccupation (for Individual)  
ENGINEER RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718332

Amount of Each Receipt this Period

114.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OTTO, JEFF, S., MR.,**

Mailing Address 25580 DODD BLVD

City  
LAKEVILLEState  
MNZip Code  
55044-8563FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717421

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PALMER, JEAN, B., MRS.,**

Mailing Address 224 ARNOLD AVE

City  
SYRACUSEState  
NYZip Code  
13210-3714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718434

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

159.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4846 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PANZARELLA, JOHN, , ,**

Mailing Address 1659 CANANARO DRIVE

City  
ANNAPOLISState  
MDZip Code  
21409-5601FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
OMNISECOccupation (for Individual)  
DEPT. OF DEF.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717073**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAPPAS, MARY, ALICE, MS.,**

Mailing Address 1617 N FLAGLER DR APT 4A

City  
WEST PALM BEACHState  
FLZip Code  
33407-6506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.64

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717226**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKS, JENNIE, , ,**

Mailing Address 386 W TROXELL RD

City  
OAK HARBORState  
WAZip Code  
98277-7909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

521.93

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716967**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4847 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PASSAROTTI, DONNA, , ,**

Mailing Address 23 EBERSOHL CIR

City  
WHITEHOUSE STATIONState  
NJZip Code  
08889-4027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717285

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PATTERSON, BARBARA, , ,**

Mailing Address 2700 SUNRUNNER LANE

City  
GULF BREEZEState  
FLZip Code  
32563-2562FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717731

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PATTERSON, BARBARA, , ,**

Mailing Address 2700 SUNRUNNER LANE

City  
GULF BREEZEState  
FLZip Code  
32563-2562FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

935.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718247

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4848 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PATTERSON, BARBARA, , ,**

Mailing Address 2700 SUNRUNNER LANE

City  
GULF BREEZEState  
FLZip Code  
32563-2562FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2025

**Transaction ID : SA11A.27718252**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PATTERSON, BARBARA, , ,**

Mailing Address 2700 SUNRUNNER LANE

City  
GULF BREEZEState  
FLZip Code  
32563-2562FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2025

**Transaction ID : SA11A.27718253**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PATTERSON, BARBARA, , ,**

Mailing Address 2700 SUNRUNNER LANE

City  
GULF BREEZEState  
FLZip Code  
32563-2562FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

935.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2025

**Transaction ID : SA11A.27718257**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4849 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PATTERSON, BARBARA, , ,**

Mailing Address 2700 SUNRUNNER LANE

City  
GULF BREEZEState  
FLZip Code  
32563-2562FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718260**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PATTERSON, BARBARA, , ,**

Mailing Address 2700 SUNRUNNER LANE

City  
GULF BREEZEState  
FLZip Code  
32563-2562FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718274**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAULSON, KATHLEEN, , ,**

Mailing Address 7725 E SANDALWOOD

City  
SCOTTSDALEState  
AZZip Code  
85250-7732FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718805**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4850 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.76

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716852**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRY, FRED, M., MR.,**

Mailing Address 2628 N SALISBURY ST

City  
WEST LAFAYETTEState  
INZip Code  
47906-1430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

673.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718529**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERRY, NELL, , ,**

Mailing Address 1705 PALMETTO CV

City  
DERIDDERState  
LAZip Code  
70634-5382FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

597.14

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717483**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

316.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4851 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETRU, LAWRENCE, , ,**

Mailing Address 6 TEXAS DANDY DR.

City  
TOMBALLState  
TXZip Code  
77377-2447FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REDSTONE PAYMENTOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717666

Amount of Each Receipt this Period

475.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717219

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718278

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

495.83

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4852 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTION

State  
MO

Zip Code  
64834-9746

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY CO

Occupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27718642**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTION

State  
MO

Zip Code  
64834-9746

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY CO

Occupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27718643**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PLANK, HEATHER, , ,**

Mailing Address PO BOX 5082

City  
SHERIDAN

State  
WY

Zip Code  
82801-1382

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

903.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

**Transaction ID : SA11A.27716153**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

141.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4853 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716172

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716177

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717299

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4854 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POPE, EDWARD, , ,**

Mailing Address 354 E EMBASSY ST

City  
TEMPEState  
AZZip Code  
85288-1316FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.94

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718610**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POTKIN, JULIE, , ,**

Mailing Address 7960 SOQUEL DR.

City  
APTOSState  
CAZip Code  
95003-3995FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718378**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PREMO, TERRY, , ,**

Mailing Address 1409 EVERGREEN PARK DR. SW - 301

City  
OLYMPIAState  
WAZip Code  
98502-5827FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716551**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4855 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PREMO, TERRY, , ,**

Mailing Address 1409 EVERGREEN PARK DR. SW - 301

City  
OLYMPIAState  
WAZip Code  
98502-5827FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27717477

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRESCOTT, ALLEN, , ,**

Mailing Address 11540 W OAKMONT DR

City  
MUKILTEOState  
WAZip Code  
98275-4871FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27716648

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PROBSTFIELD, JEFFREY, , ,**

Mailing Address 701 W SAN MARCOS DR

City  
CHANDLERState  
AZZip Code  
85225-9553FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27718180

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

204.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4856 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716903

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716907

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716908

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4857 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716911

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716916

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716919

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

94.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4858 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716922

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716925

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716934

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

68.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4859 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716954

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716956

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. QUICK, DONALD, , MR.,**

Mailing Address 310 REGENTS RD

City  
COLUMBUSState  
OHZip Code  
43230-4400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716959

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

68.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4860 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RANDALL, WAYNE, C., MR.,**

Mailing Address 19857 GREENVIEW DR.

City  
WOODBIDGEState  
CAZip Code  
95258-9231FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UNITED PALLET SERVICES, INC.Occupation (for Individual)  
PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718858**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718628**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718631**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.35



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4861 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAYBORN, KENNETH, , ,**

Mailing Address 507 KYLE LANE NW

City  
CLEVELANDState  
TNZip Code  
37312-6439FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1059.67

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718241**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAYCRAFT, ALVIN, K., ,**

Mailing Address 7983 BUSSA LANE

City  
RAPID CITYState  
MIZip Code  
49676-9203FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718493**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. READ, THOMAS, , ,**

Mailing Address 114 LYNDBURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.70

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716583**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4862 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716588

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716600

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REAGAN, RONALD, C., ,**

Mailing Address 1783 FOUR MILE COVE PKWY

City  
CAPE CORALState  
FLZip Code  
33990-2409FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716542

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4863 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REAGAN, RONALD, C., ,**

Mailing Address 1783 FOUR MILE COVE PKWY

City  
CAPE CORALState  
FLZip Code  
33990-2409FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717255**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REEDY, COLEMAN, , ,**

Mailing Address 1930 STATE HIGHWAY 193

City  
COOLState  
CAZip Code  
95614-9469FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOCAL 1245Occupation (for Individual)  
LINEMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717871**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REESE, THOMAS, , ,**

Mailing Address 23976 STAGECOACH ROAD

City  
GENESEOState  
ILZip Code  
61254-8361FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

279.66

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717579**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

191.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4864 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REICHOW, GARY, , ,**

Mailing Address 5516 RIGEL COURT

City  
ATLANTIC BEACHState  
FLZip Code  
32233-4581FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718450

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REICHOW, GARY, , ,**

Mailing Address 5516 RIGEL COURT

City  
ATLANTIC BEACHState  
FLZip Code  
32233-4581FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718464

Amount of Each Receipt this Period

21.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REITER, RUSSEL, J., ,**

Mailing Address 14275 SAVANNAH PASS

City  
SAN ANTONIOState  
TXZip Code  
78216-7849FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE OF TEXASOccupation (for Individual)  
SCIENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717884

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

171.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4865 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RENTOF, PETER, , ,**Mailing Address 235 EAST 22ND STREET  
7DCity  
NEW YORKState  
NYZip Code  
10010-4635FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.33

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718739**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RHODES, ZOFIA, , ,**

Mailing Address P O BOX 2423

City  
BRYSON CITYState  
NCZip Code  
28713-2423FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.50

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717848**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICCIUTI, LOU RAE, , ,**

Mailing Address 12107 KAMMERER AVENUE

City  
CONNEAUT LAKEState  
PAZip Code  
16316-3941FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.98

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717110**

Amount of Each Receipt this Period

14.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4866 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICHTER, GUNTRAM, , MS.,**

Mailing Address 7 VALLEYWOOD CT W

City  
SAINT JAMESState  
NYZip Code  
11780-1013FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717276

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716295

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718578

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

76.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4867 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RILEY, GREGORY, , ,**

Mailing Address 2919 PLEASANT GROVE RD

City  
LITTLE ROCKState  
MSZip Code  
39337-9228FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1091.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718846**

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717089**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RITCHIE, PATTI, , ,**Mailing Address 3000 MOUNT HOPE RD  
LOT 6City  
GRASS LAKEState  
MIZip Code  
49240-8905FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

369.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716626**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

573.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4868 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIVERO, JORGE, , ,**

Mailing Address 377 EAGLE CREEK CIR

City  
LAKE MARYState  
FLZip Code  
32746-3830FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717790

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBERTSMATSUO, MARY, , ,**

Mailing Address 903 WAIHOLO STREET

City  
HONOLULUState  
HIZip Code  
96821-1225FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717954

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, CLAUDETTE, C., MS.,**

Mailing Address 24290 HATTERAS ST

City  
WOODLAND HILLSState  
CAZip Code  
91367-3937FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716586

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

128.82



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4869 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, CLAUDETTE, C., MS.,**

Mailing Address 24290 HATTERAS ST

City  
WOODLAND HILLSState  
CAZip Code  
91367-3937FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.44

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716776**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROGERS, WANDA, , ,**Mailing Address 3701 W MCNAB RD  
APT 110City  
POMPANO BEACHState  
FLZip Code  
33069-4931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.35

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717206**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, WANDA, , ,**Mailing Address 3701 W MCNAB RD  
APT 110City  
POMPANO BEACHState  
FLZip Code  
33069-4931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221.35

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717212**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

34.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4870 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROSS, DIANE, M., ,**

Mailing Address 9111 NICKELS BLVD

City  
BOYNTON BEACHState  
FLZip Code  
33436-2765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716145

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROSS, DIANE, M., ,**

Mailing Address 9111 NICKELS BLVD

City  
BOYNTON BEACHState  
FLZip Code  
33436-2765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716147

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROSS, DIANE, M., ,**

Mailing Address 9111 NICKELS BLVD

City  
BOYNTON BEACHState  
FLZip Code  
33436-2765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716148

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

45.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4871 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROSS, DIANE, M., ,**

Mailing Address 9111 NICKELS BLVD

City  
BOYNTON BEACHState  
FLZip Code  
33436-2765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716149

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROSS, DIANE, M., ,**

Mailing Address 9111 NICKELS BLVD

City  
BOYNTON BEACHState  
FLZip Code  
33436-2765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716151

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROSS, DIANE, M., ,**

Mailing Address 9111 NICKELS BLVD

City  
BOYNTON BEACHState  
FLZip Code  
33436-2765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716152

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4872 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROSS, DIANE, M., ,

Mailing Address 9111 NICKELS BLVD

City  
BOYNTON BEACHState  
FLZip Code  
33436-2765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716155

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROSS, DIANE, M., ,

Mailing Address 9111 NICKELS BLVD

City  
BOYNTON BEACHState  
FLZip Code  
33436-2765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716162

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUBEL, DIANE, , ,

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718044

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4873 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716965**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUNALDUE, DONALD, , MR.,**

Mailing Address 32 PLANTATION DR.

City  
SOUTHERN PINESState  
NCZip Code  
28387-2967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718678**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAMS, SANDY, , ,**

Mailing Address P O BOX 466

City  
TUPELOState  
MSZip Code  
38802-0466FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

272.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716450**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4874 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716676**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716809**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716811**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4875 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716813

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716823

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716836

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

76.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4876 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2025

**Transaction ID : SA11A.27716842**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2025

**Transaction ID : SA11A.27716846**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2025

**Transaction ID : SA11A.27716868**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.64



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4877 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717970**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANFORD, MARCELLA, FRANCIS, MS.,**

Mailing Address 12593 CANBY AVE

City  
FARIBAULTState  
MNZip Code  
55021-7254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718307**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SARBA, BARRY, , ,**

Mailing Address 435 BATTLE DR.

City  
FANNINState  
TXZip Code  
77960-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

338.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717642**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4878 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717158**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHLOUGH, JAMES, , ,**

Mailing Address 3810 CHURCH HILL

City  
CRYSTAL LAKEState  
ILZip Code  
60014-6511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716848**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHMECK, RICHARD, , MRS.,**

Mailing Address 1544 SAUCONY RD

City  
KUTZTOWNState  
PAZip Code  
19530-8875FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

292.66

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716277**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4879 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHRAM, CHARLES, , ,**

Mailing Address 14816 WEST HURON DRIVE

City  
SUN CITY WESTState  
AZZip Code  
85375-5988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716560**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHWAB, CHRISTINE, , ,**

Mailing Address 1740 DERRS SQUARE E

City  
FREDERICKState  
MDZip Code  
21701-2507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718426**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHWARTZ, JAMES, F., MR.,**

Mailing Address 60455 DESERT SHADOW DRIVE

City  
LA QUINTAState  
CAZip Code  
92253-7726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

326.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718387**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4880 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, JOAN, C., MS.,**

Mailing Address 5094 TEN MILE PL.

City  
CASTLE ROCKState  
COZip Code  
80108-8837FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716574**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SELIG, ROBERT, J., ,**

Mailing Address 65 JOLLEY DR APT 331

City  
BLOOMFIELDState  
CTZip Code  
06002-4251FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718268**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEXTON, MARTHA, , ,**

Mailing Address 204 FOUNTAIN VIEW

City  
SHREVEPORTState  
LAZip Code  
71118-2972FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717017**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4881 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHAYS, LORRAINE, , ,**

Mailing Address 14659 CANALVIEW DRIVE APT A

City  
DELRAY BEACHState  
FLZip Code  
33484-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717534**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716202**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHUGER, JILL, , ,**

Mailing Address N7756 BUSHEY RD

City  
TREGOState  
WIZip Code  
54888-9327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717955**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4882 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SILVA, LISA, , ,**

Mailing Address 1456 BEAR SPRINGS TRAIL 63158

City  
PIPE CREEKState  
TXZip Code  
78063-6679FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.49

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716355**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIMPSON, BARBRA, , ,**

Mailing Address 872 5TH STREET

City  
MANHATTAN BEACHState  
CAZip Code  
90266-6664FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717101**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIMPSON, ROBIN, , ,**

Mailing Address 111 COUNTRY OAKS DR.

City  
MACONState  
GAZip Code  
31220-2668FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

622.43

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717922**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4883 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIMPSON, ROBIN, , ,**

Mailing Address 111 COUNTRY OAKS DR.

City  
MACONState  
GAZip Code  
31220-2668FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717926

Amount of Each Receipt this Period

80.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIMPSON, ROBIN, , ,**

Mailing Address 111 COUNTRY OAKS DR.

City  
MACONState  
GAZip Code  
31220-2668FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717928

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIMPSON, ROBIN, , ,**

Mailing Address 111 COUNTRY OAKS DR.

City  
MACONState  
GAZip Code  
31220-2668FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

622.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717929

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4884 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SKERSICK, SARA, , ,**

Mailing Address 3299 TOUCHMARK CT.

City  
PRESCOTTState  
AZZip Code  
86301-5726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716589**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, MICHAEL, A., MR.,**

Mailing Address P.O. BOX 971

City  
MIDDLEBURGState  
VAZip Code  
20118-0971FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VALLEY PROTEINS, INC.Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8274.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717169**

Amount of Each Receipt this Period

1485.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, MICHAEL, A., MR.,**

Mailing Address P.O. BOX 971

City  
MIDDLEBURGState  
VAZip Code  
20118-0971FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VALLEY PROTEINS, INC.Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

8274.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717175**

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2630.12



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4885 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, NEAL, , ,**

Mailing Address 45 OLD COTTAGE BEACH DRIVE

City  
ROCKPORTState  
TXZip Code  
78382-7769FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WELLS FARGOOccupation (for Individual)  
SEMI RETIRED FULL TIME TELLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718155

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, ROBERT, , ,**Mailing Address 300 OCEAN RD.  
3ECity  
VERO BEACHState  
FLZip Code  
32963-3272FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718775

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SNOWDEN, JAMES, , MR., III**

Mailing Address 4033 TAMWORTH RD

City  
FORT WORTHState  
TXZip Code  
76116-7337FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1694.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716594

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4886 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNOWDEN, JAMES, , MR., III**

Mailing Address 4033 TAMWORTH RD

City  
FORT WORTHState  
TXZip Code  
76116-7337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1694.01

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716625**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOBOLAK, EDWARD, S., MR.,**

Mailing Address 217 THE HILLS DR.

City  
AUSTINState  
TXZip Code  
78738-1338FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718013**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLEANICOV, PAVEL, A., MR.,**

Mailing Address 711 MEADOW CREST DRIVE

City  
ROCKTONState  
ILZip Code  
61072-8000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.52

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716885**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4887 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYN

State  
NY

Zip Code  
11235-6031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27717127**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPAETH, EDMUND, , ,**

Mailing Address 26536 LOVE LN

City  
RAMONA

State  
CA

Zip Code  
92065-4822

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27718803**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPECHT, VIVIAN, , ,**

Mailing Address PO BOX 63

City  
LYMAN

State  
NE

Zip Code  
69352-0063

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

427.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27717956**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

93.85

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4888 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STARR, CAROL, , ,**

Mailing Address 361 NEW MEADOW RD

City  
BARRINGTON

State  
RI

Zip Code  
02806-3729

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27716524**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, SHARON, , ,**

Mailing Address 105 HALLMARK XING

City  
ROCK HILL

State  
SC

Zip Code  
29732-7650

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27718520**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STITT, DALE, , ,**

Mailing Address 6004 WATERVIEW DR

City  
ARLINGTON

State  
TX

Zip Code  
76016-2044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

341.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27717417**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

216.83

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4889 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STOKES, PATSY, , ,**

Mailing Address 2092 GREY FOX LANE

City  
VIRGINIA BEACH

State  
VA

Zip Code  
23456-5206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27716301**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOKES, PATSY, , ,**

Mailing Address 2092 GREY FOX LANE

City  
VIRGINIA BEACH

State  
VA

Zip Code  
23456-5206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27716905**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUBOWICZ, DEBRA, , ,**

Mailing Address 20976 TOBACCO SQUARE

City  
ASHBURN

State  
VA

Zip Code  
20147-4612

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

**Transaction ID : SA11A.27718466**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

123.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4890 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUBOWICZ, DEBRA, , ,**

Mailing Address 20976 TOBACCO SQUARE

City  
ASHBURNState  
VAZip Code  
20147-4612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718468

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUBOWICZ, DEBRA, , ,**

Mailing Address 20976 TOBACCO SQUARE

City  
ASHBURNState  
VAZip Code  
20147-4612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718469

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUBOWICZ, DEBRA, , ,**

Mailing Address 20976 TOBACCO SQUARE

City  
ASHBURNState  
VAZip Code  
20147-4612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718473

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4891 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUBOWICZ, DEBRA, , ,**

Mailing Address 20976 TOBACCO SQUARE

City  
ASHBURNState  
VAZip Code  
20147-4612FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.76

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718479**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUBOWICZ, DEBRA, , ,**

Mailing Address 20976 TOBACCO SQUARE

City  
ASHBURNState  
VAZip Code  
20147-4612FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.76

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718503**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUDOL, JEAN, , ,**

Mailing Address 2640 GATELY DRIVE WEST

City  
WEST PALM BEACHState  
FLZip Code  
33415-7996FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.79

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718384**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

137.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4892 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUGGS, JOHN, , ,**

Mailing Address 2533 ROSEDALE RD

City  
PORT ALLENState  
LAZip Code  
70767-3619FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SEMSOccupation (for Individual)  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718185**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUTAY, CAROL, , ,**

Mailing Address 9327 CYPRESS BEND DR.

City  
TAMPAState  
FLZip Code  
33647-2553FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718049**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SYLVESTRI, RONALD, J., MR.,**

Mailing Address 333 WEST STREET # 5

City  
DARIENState  
CTZip Code  
06820-4038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

366.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718687**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

570.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4893 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, PEGGY, , ,**

Mailing Address 13320 NEW DELAWARE ROAD

City  
MOUNT VERNONState  
OHZip Code  
43050-9138FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.80

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27717677

Amount of Each Receipt this Period

10.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THIEMAN, TOM, A., MR.,**

Mailing Address 100 GILBERG ST

City  
NEW BREMENState  
OHZip Code  
45869-1286FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27718509

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, RONALD, L., MR.,**

Mailing Address 386 HICKORY GROVE CIR

City  
HARRISONBURGState  
VAZip Code  
22801-7607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

307.04

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27717142

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4894 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMSON, PAUL, , MR.,**

Mailing Address 606 CANDLEWOOD DRIVE

City  
CANON CITYState  
COZip Code  
81212-2033FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.48

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717016**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TIPTON, STEVEN, , ,**

Mailing Address 3818 EAST 63RD STREET

City  
TULSAState  
OKZip Code  
74136-1524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.44

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716845**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TODD, LESTER, , ,**

Mailing Address 1115 BLUERIDGE DR.

City  
CANYON LAKEState  
TXZip Code  
78133-4185FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STUDENT TRANSPORTATION OF AMERICAOccupation (for Individual)  
BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717135**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4895 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TONKER, WANDA, B., MS.,**

Mailing Address 436 RIVER RUN DRIVE

City  
PALMYRAState  
VAZip Code  
22963-4251FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718356

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TROYER, DENNIS, , ,**

Mailing Address 2192 GLEN COVE WAY

City  
HIGH POINTState  
NCZip Code  
27265-9445FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717250

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TROYER, DENNIS, , ,**

Mailing Address 2192 GLEN COVE WAY

City  
HIGH POINTState  
NCZip Code  
27265-9445FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

377.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717307

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

112.89

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4896 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TUMLINSON, RICHARD, , ,**

Mailing Address P.O. BOX 3817

City  
ENGLEWOODState  
COZip Code  
80155-3817FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716189

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TUMLINSON, RICHARD, , ,**

Mailing Address P.O. BOX 3817

City  
ENGLEWOODState  
COZip Code  
80155-3817FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716190

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TUMLINSON, RICHARD, , ,**

Mailing Address P.O. BOX 3817

City  
ENGLEWOODState  
COZip Code  
80155-3817FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718638

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

141.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4897 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27718516

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TURNER, BEVERLY, , ,**

Mailing Address 2023 PAYTON LANE NE

City  
GRAND RAPIDSState  
MIZip Code  
49505-4421FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.80

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27718557

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TURNER, MICHAEL, , ,**

Mailing Address 3324 PEACHTREE RD NE

City  
ATLANTAState  
GAZip Code  
30326-1001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

308.31

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025

Transaction ID : SA11A.27717532

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4898 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716234**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716305**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716719**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

34.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4899 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717840**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VANDERHOOF, JAMES, , MR.,**

Mailing Address 4155 WESTWIND DR

City  
VERNONState  
NYZip Code  
13476-4629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VALLEY FAMILY PRACTICEOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717093**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VERCHIO, JUDITH, , ,**

Mailing Address 1236 DARTFORD DR

City  
TARPON SPGSState  
FLZip Code  
34688-7640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716996**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4900 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VERPLANK, JOEL, , MR.,**

Mailing Address 9212 TURTLE POINT DR.

City  
KILLENState  
ALZip Code  
35645-2854FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VERPLANK ENTERPRISESOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27717086**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VINING, SARA, , ,**Mailing Address 2825 CARTER RD  
UNIT 117City  
SUMTERState  
SCZip Code  
29150-1733FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718267**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VIS, SHARON, , ,**

Mailing Address P.O. BOX 835

City  
MONTROSEState  
COZip Code  
81402-0835FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718017**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4901 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VITALI, THEODORE, , ,**

Mailing Address 9802 WINTERNIGHT LANE

City  
SAINT LOUISState  
MOZip Code  
63126-3246FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ST. LOUIS UNIVERSITYOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27718355**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716159**

Amount of Each Receipt this Period

1.47

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11A.27716998**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4902 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VOLK, BEVERLY, , ,**

Mailing Address 1511 RED MAPLE LANE

City  
ALLENTOWNState  
PAZip Code  
18104-2011FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718076

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WAHMAN, GERALD, , ,**

Mailing Address PO BOX 789

City  
ALMAState  
ARZip Code  
72921-0789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718052

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALBERG, JAIMIE, , ,**

Mailing Address 7040 WELLS FARGO WAY

City  
CORNINGState  
CAZip Code  
96021-9009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALBERG INC.Occupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717040

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112.47

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4903 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALDEN, JAMES, A., ,**

Mailing Address 10404 BRIARWOOD CIR

City  
GREENVILLE

State  
TX

Zip Code  
75402-3300

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.79

Date of Receipt

**02** / **24** / **2025**

**Transaction ID : SA11A.27716623**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALDEN, JAMES, A., ,**

Mailing Address 10404 BRIARWOOD CIR

City  
GREENVILLE

State  
TX

Zip Code  
75402-3300

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.79

Date of Receipt

**02** / **24** / **2025**

**Transaction ID : SA11A.27716634**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALDEN, JAMES, A., ,**

Mailing Address 10404 BRIARWOOD CIR

City  
GREENVILLE

State  
TX

Zip Code  
75402-3300

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.79

Date of Receipt

**02** / **24** / **2025**

**Transaction ID : SA11A.27716659**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4904 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALKER, LUCINDA, , ,**

Mailing Address 67 IRVING AVENUE, P.O. BOX 507

City  
HYANNIS PORTState  
MAZip Code  
02647-0507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.04

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717259**

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKER, LUCINDA, , ,**

Mailing Address 67 IRVING AVENUE, P.O. BOX 507

City  
HYANNIS PORTState  
MAZip Code  
02647-0507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.04

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718541**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALL, CHARLES, , ,**

Mailing Address 32 CORN TASSEL CIRCLE

City  
BLUFFTONState  
SCZip Code  
29910-7717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717078**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

145.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4905 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRISTOL MYERS SQUIBBOccupation (for Individual)  
COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718111

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEATHERLY, CINDI, , ,**

Mailing Address 4690 MEADOW SPRINGS DRIVE

City  
WATKINSVILLEState  
GAZip Code  
30677-4642FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716882

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEATHERMAN, GLENNA, F., ,**

Mailing Address 853 S NEWHAVEN DR.

City  
ORANGEState  
CAZip Code  
92869-5443FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716323

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4906 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEINER, SHARON, , ,**

Mailing Address 3635 SUN RIDGE DRIVE

City  
PARK CITYState  
UTZip Code  
84060-8829FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718388**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTFALL, ANNE, , ,**

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIAState  
WAZip Code  
98531-8894FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.93

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717067**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WESTFALL, ANNE, , ,**

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIAState  
WAZip Code  
98531-8894FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.93

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717533**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4907 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WESTFALL, ROBERT, , ,**

Mailing Address 3209 SETON HILL DR

City  
BELLBROOKState  
OHZip Code  
45305-8820FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.10

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718600**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHEELER, JOHN, , ,**

Mailing Address 684 NILES ROAD

City  
NEW HARTFORDState  
CTZip Code  
06057-2412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717657**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHEELER, MIEKA, L., ,**

Mailing Address 27230 STONEY BROOK DR

City  
TRENTONState  
MIZip Code  
48183-4640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

554.05

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717443**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

255.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4908 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITE, SHARON, A., MRS.,**

Mailing Address 1235 NORFOLK WAY

City  
SACRAMENTOState  
CAZip Code  
95831-1827FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TWIN RIVERS UNIFIED SCHOOL DISTRICTOccupation (for Individual)  
RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718787

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITE, VICKY, , ,**

Mailing Address 12005 NS 3565

City  
SEMINOLEState  
OKZip Code  
74868-3404FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717753

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITE, VICKY, , ,**

Mailing Address 12005 NS 3565

City  
SEMINOLEState  
OKZip Code  
74868-3404FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717761

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.90



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4909 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITEMORE, BEBE, , ,**

Mailing Address 4785 MURFREESBORO ROAD

City  
ARRINGTONState  
TNZip Code  
37014-9171FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716993**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITEMORE, BEBE, , ,**

Mailing Address 4785 MURFREESBORO ROAD

City  
ARRINGTONState  
TNZip Code  
37014-9171FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716999**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

371.31

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718462**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4910 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WIGGERS, LOWE, H., , III**

Mailing Address 466 HUMPHREY LANE

City  
MARYSVILLEState  
OHZip Code  
43040-2634FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718022

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, BETTY, , ,**

Mailing Address 311 HARPER LOOP

City  
GRANTS PASSState  
ORZip Code  
97527-5339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27718428

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMS, JAMES, , ,**

Mailing Address 822 VANCE AVE

City  
MEMPHISState  
TNZip Code  
38126-2917FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WILLIAMS SIGNOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717272

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4911 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, JEAN, , ,**

Mailing Address 5644 ARAL DRIVE

City  
LAKELANDState  
FLZip Code  
33805-9615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.62

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716632**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, JEAN, , ,**

Mailing Address 5644 ARAL DRIVE

City  
LAKELANDState  
FLZip Code  
33805-9615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.62

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717009**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, PHILLIP, , ,**

Mailing Address 7866 TUMBLEWEED TRL

City  
SPRINGFIELDState  
ILZip Code  
62707-4582FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PHILLIP B WILSONOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.70

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718574**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

41.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4912 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, ROBERT, , ,**

Mailing Address 12003 WHISTLING WAY

City  
BRADENTONState  
FLZip Code  
34202-2054FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BWG FILTRATION, INC.Occupation (for Individual)  
PRESIDENT - SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718613**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODS, BILLY, R., MR., JR.**

Mailing Address 3363 HWY 4

City  
RINGGOLDState  
LAZip Code  
71068-2942FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.04

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718079**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

348.52

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716359**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

209.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4913 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716361

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716363

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716364

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4914 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716375

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716388

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716391

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4915 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716402**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716407**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

348.52

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716411**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4916 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716413

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716418

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716423

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.08



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4917 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717784

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, RICHARD, L., ,**

Mailing Address 14416 BEACH RD.

City  
CHESTERFIELDState  
VAZip Code  
23838-2307FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717056

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27716562

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

129.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4918 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27716976**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YATES SMITH, SHARI, , MS.,**

Mailing Address P.O. BOX 2377

City  
RUIDOSOState  
NMZip Code  
88355-2377FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MYCO IND. INC.Occupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14647.12

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27717999**

Amount of Each Receipt this Period

5205.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YATES, SYLVIA, , ,**

Mailing Address 4107 N ALABAMA ST

City  
LOXLEYState  
ALZip Code  
36551-4533FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.60

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA11A.27718791**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5285.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4919 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZAPERACH, TERRY, , ,**

Mailing Address 746 LANTANA ST.

City  
COCOAState  
FLZip Code  
32926-5246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717608

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZAVARZINA, ANYA, , ,**

Mailing Address 802 N DELAWARE ST, 211

City

SAN MATEO

State

CA

Zip Code

94401-1514

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GALLIUM ARTISTIC SERVICES SIMSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11A.27717454

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11C.27719047

Amount of Each Receipt this Period

73321.73

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4920 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719826

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719838

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ABUID, JULIA, , ,

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719840

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4921 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABUID, JULIA, , ,**

Mailing Address P.O. BOX 921495

City  
SYLMARState  
CAZip Code  
91392-1495FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719844**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721072**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMS, ZEREE, , ,**

Mailing Address P.O. BOX 3650

City  
WILLIAMSBURGState  
VAZip Code  
23187-3650FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LIVING WATER COUNSELINGOccupation (for Individual)  
THERAPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720200**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4922 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADKINS, JANET, , ,**

Mailing Address 3301 JENNINGS DRIVE

City  
SPRINGFIELDState  
ILZip Code  
62704-5536FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720784**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AKERS, JOSEPH, , ,**

Mailing Address 5919 GOODWIN AVE

City  
DALLASState  
TXZip Code  
75206-6107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720883**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALIOTA, PAULETTE, , ,**

Mailing Address 538 MARGO COURT

City  
ERIEState  
PAZip Code  
16505-2112FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1027.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721399**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

290.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4923 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.65

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719194**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.65

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719196**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

773.65

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719198**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4924 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719200**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719202**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

773.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719204**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4925 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.65

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719207**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.65

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719210**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

773.65

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719212**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4926 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.65

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719215**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720681**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720691**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

203.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4927 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720753**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CYNNIE, , ,**

Mailing Address 55 RODEO AVENUE # 5

City  
SAUSALITOState  
CAZip Code  
94965-1738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720977**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, CYNNIE, , ,**

Mailing Address 55 RODEO AVENUE # 5

City  
SAUSALITOState  
CAZip Code  
94965-1738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

349.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720986**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4928 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, SUE, , ,**

Mailing Address 1044 CHURCH ST., NO.134

City  
SULPHUR SPRINGSState  
TXZip Code  
75482-2272FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.08

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719477**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDREWS, WILLIAM, F., MR.,**

Mailing Address 1409 MORAN RD

City  
FRANKLINState  
TNZip Code  
37069-6301FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719967**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. APEL, RONALD, H., MR.,**

Mailing Address 2345 2ND AVE NW

City  
CULLMANState  
ALZip Code  
35058-0470FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
APEL STEELOccupation (for Individual)  
STEEL FABRICATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720397**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4929 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARNOLD, FLORENCE, M., MS.,**

Mailing Address 231 N MANNING ST

City  
HILLSDALEState  
MIZip Code  
49242-1216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720968

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARNOLD, RUSSELL, , ,**

Mailing Address 966 BLUESTEM DRIVE

City  
GENEVAState  
ILZip Code  
60134-3732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720654

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BALDWIN, JAMES, , MR.,**

Mailing Address 9 MAURA LANE

City  
DANBURYState  
CTZip Code  
06810-7118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719608

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4930 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARRY, ELIZABETH, , ,**

Mailing Address 572 HARLAND ST

City  
MILTONState  
MAZip Code  
02186-5216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CPACOccupation (for Individual)  
ADMIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720194**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARTLETT, RICK, , ,**

Mailing Address 28735 N 20TH LN

City  
PHOENIXState  
AZZip Code  
85085-2788FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720814**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARTO, THEODORE, , ,**

Mailing Address 1245 DEACON RD

City  
HAINESPORTState  
NJZip Code  
08036-3634FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

283.36

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719710**

Amount of Each Receipt this Period

44.18

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

252.38

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4931 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARTONE, VIRGINIA, , ,**

Mailing Address 3009 MUMBARTO AVENUE

City  
BOISEState  
IDZip Code  
83713-5082FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720171

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARTONE, VIRGINIA, , ,**

Mailing Address 3009 MUMBARTO AVENUE

City  
BOISEState  
IDZip Code  
83713-5082FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720175

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARTONE, VIRGINIA, , ,**

Mailing Address 3009 MUMBARTO AVENUE

City  
BOISEState  
IDZip Code  
83713-5082FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

241.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720182

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4932 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEAVER, MORRIS, T., ,**

Mailing Address 2868 DRAKE AVE

City  
COSTA MESAState  
CAZip Code  
92626-5804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

**Transaction ID : SA11A.27720739**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BECK, ARNOLD, A., MR.,**

Mailing Address 300 FREDRICKSBURG CT. NE

City  
NORTH CANTONState  
OHZip Code  
44720-2575FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

**Transaction ID : SA11A.27719547**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BELVILL, JOHN, , MR.,**

Mailing Address P.O. BOX 630

City  
LA GRANGEState  
TXZip Code  
78945-0630FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BCF SERVICES, INC.Occupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

**Transaction ID : SA11A.27719746**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4933 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERRY, TERRY, , ,**

Mailing Address 1758 BROOKE ROAD

City  
STAFFORDState  
VAZip Code  
22554-5524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3644.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719153

Amount of Each Receipt this Period

988.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719537

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719541

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1091.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4934 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719546

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719707

Amount of Each Receipt this Period

60.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720293

Amount of Each Receipt this Period

0.35

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

135.35

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4935 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720420**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BIDDLE, GARY, , ,**

Mailing Address 15 BIDDLE ROAD

City  
CARLISLEState  
PAZip Code  
17015-9794FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SAMTECOccupation (for Individual)  
ENGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719872**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721292**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

178.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4936 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLANKENSHIP, KATHY, , ,**

Mailing Address 125 ORCHARD DR.

City  
ELIDAState  
OHZip Code  
45807-1084FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720834

Amount of Each Receipt this Period

28.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNEState  
ALZip Code  
35967-5145FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720497

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOHANAN, MARK, , ,**

Mailing Address 219 E HOUSTON ST SUITE 275

City  
SAN ANTONIOState  
TXZip Code  
78205-1855FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOHANANS LTDOccupation (for Individual)  
RESTAURANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719735

Amount of Each Receipt this Period

20.22

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4937 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOLIN, BOB, , ,**Mailing Address **BOX 368**City  
**CHANDLER**State  
**TX**Zip Code  
**75758-0368**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**NEWPORTGROUP**Occupation (for Individual)  
**ACTUARY**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**314.13**

Date of Receipt

**02 / 25 / 2025****Transaction ID : SA11A.27721083**

Amount of Each Receipt this Period

**104.10**☐ Memo Item**CONTRIBUTION****EARMARKED FROM WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BORNHEIMER, JIM, , ,**Mailing Address **911 SHERMAN PKWY**City  
**BELTON**State  
**MO**Zip Code  
**64012-4207**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1808.29**

Date of Receipt

**02 / 25 / 2025****Transaction ID : SA11A.27720114**

Amount of Each Receipt this Period

**50.00**☐ Memo Item**CONTRIBUTION****EARMARKED FROM WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOURKE, KAREN, L., MS.,**Mailing Address **6013 S 166TH AVE**City  
**OMAHA**State  
**NE**Zip Code  
**68135-5303**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**329.53**

Date of Receipt

**02 / 25 / 2025****Transaction ID : SA11A.27719079**

Amount of Each Receipt this Period

**36.44**☐ Memo Item**CONTRIBUTION****EARMARKED FROM WINRED****SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►**190.54**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4938 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOWERSOX, JOANN, , ,**

Mailing Address 8305 GLEN HEATHER DRIVE

City  
FREDERICKState  
MDZip Code  
21702-5805FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720799**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOWLER, DONALD, , ,**

Mailing Address PMB 8089

City  
SISTERSState  
ORZip Code  
97759-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.30

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719254**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRACKEN, KAY, , ,**

Mailing Address 405 HAMVASY

City  
TYLERState  
TXZip Code  
75701-5324FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRACKEN INTERESTOccupation (for Individual)  
OIL AND GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2334.17

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719264**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

239.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4939 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRANDNER, PATRICK, , ,**

Mailing Address 4 MENAGGIO CT

City  
HENDERSONState  
NVZip Code  
89011-2815FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719274**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRASIE, DONALD, R., MR.,**

Mailing Address 4860 LONE OAK CT

City  
ANN ARBORState  
MIZip Code  
48108-8575FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720294**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROE, SHANNON, , ,**

Mailing Address 1012 N SHORE DR.

City  
PORT ISABELState  
TXZip Code  
78578-4600FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

390.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720231**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4940 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROSTOWITZ, MICHAEL, , MR.,**Mailing Address 1322 S PRAIRIE AVE  
UNIT 1606City  
CHICAGOState  
ILZip Code  
60605-3083FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719234**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROSTOWITZ, MICHAEL, , MR.,**Mailing Address 1322 S PRAIRIE AVE  
UNIT 1606City  
CHICAGOState  
ILZip Code  
60605-3083FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719241**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, DENNIS, , ,**

Mailing Address 3022 REDWOOD AVENUE

City  
LAKELANDState  
FLZip Code  
33803-4345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

642.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719615**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4941 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721179**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721180**

Amount of Each Receipt this Period

5.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721182**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

21.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4942 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27721184

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27721189

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27721191

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4943 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721199**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, SHARMAN, , MS.,**

Mailing Address 110 CLIFF ST

City  
CORDOVAState  
ALZip Code  
35550-1216FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2819.84

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720451**

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, SHARMAN, , MS.,**

Mailing Address 110 CLIFF ST

City  
CORDOVAState  
ALZip Code  
35550-1216FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2819.84

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720484**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4944 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURGERT, JANEAL, , ,**

Mailing Address 5 N 1600 W

City  
WEST POINTState  
UTZip Code  
84015-8061FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

626.24

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719501**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURNETT, SUSAN, T., MS.,**

Mailing Address 57 HAWTHORNE AVE

City  
FLORAL PARKState  
NYZip Code  
11001-1605FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720860**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURNS, MICHAEL, J., ,**

Mailing Address 7287 HORIZON DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.44

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719540**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4945 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURNS, MICHAEL, J., ,**

Mailing Address 7287 HORIZON DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719868**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURR, LAWRENCE, , MR.,**

Mailing Address 31065 CASTLE RIDGE DRIVE

City  
BROOKSVILLEState  
FLZip Code  
34602-7529FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719856**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURR, LAWRENCE, , MR.,**

Mailing Address 31065 CASTLE RIDGE DRIVE

City  
BROOKSVILLEState  
FLZip Code  
34602-7529FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719906**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4946 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUZOGANY, ALEX, , ,**

Mailing Address 1442 SOCIETY HILL DRIVE

City  
BENSALEMState  
PAZip Code  
19020-3689FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.75

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720007**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CALVARUSO, MICHAEL, , ,**

Mailing Address 304 CENTRAL AVENUE

City  
VINE GROVEState  
KYZip Code  
40175-1472FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720006**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMET, MICHELE, , ,**

Mailing Address 4252 W. LEWIS CIRCLE

City  
HURRICANEState  
UTZip Code  
84737-7721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720576**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4947 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721266**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARBO, LINDA, , ,**

Mailing Address 23 SHIRRA AVENUE

City  
STATEN ISLANDState  
NYZip Code  
10314-4986FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719804**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARISONE, ANTOINETTE, , ,**

Mailing Address 10 VITALE TRL

City  
GREEN BROOKState  
NJZip Code  
08812-1904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719324**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.93



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4948 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719261**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720539**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721118**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

43.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 4949 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721131**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARRIER, CONNIE, , ,**

Mailing Address 279 WEST 1080 SOUTH

City  
HURRICANEState  
UTZip Code  
84737-2345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HURRICANE FAMILY CLINICOccupation (for Individual)  
MEDICAL RECEPTIONIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720011**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARTER, CHRISTINE, , ,**

Mailing Address 1199 OVERLOOK DR.

City  
SIERRA VISTAState  
AZZip Code  
85635-5511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

775.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721114**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.84

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4950 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARTER, CHRISTINE, , ,**

Mailing Address 1199 OVERLOOK DR.

City  
SIERRA VISTAState  
AZZip Code  
85635-5511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721115**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARTER, CHRISTINE, , ,**

Mailing Address 1199 OVERLOOK DR.

City  
SIERRA VISTAState  
AZZip Code  
85635-5511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721117**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARTER, CHRISTINE, , ,**

Mailing Address 1199 OVERLOOK DR.

City  
SIERRA VISTAState  
AZZip Code  
85635-5511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

775.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721119**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4951 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CASSENTI, JEAN, , ,**

Mailing Address 29 ARNOLD DR

City  
TOLLANDState  
CTZip Code  
06084-2810FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720122**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719480**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719536**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4952 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANA, MAGHAR, S., MR.,**

Mailing Address 315 MERCEDES LANE

City  
COLBURNState  
INZip Code  
47905-4566FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.51

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27721030

Amount of Each Receipt this Period

3.96

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANCELLOR CASE, NANCY, J., MS.,**Mailing Address 24001 CINCO VILLAGE CENTER BLVD  
APT 1134City  
KATYState  
TXZip Code  
77494-8420FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1082.06

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27719372

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANCELLOR CASE, NANCY, J., MS.,**Mailing Address 24001 CINCO VILLAGE CENTER BLVD  
APT 1134City  
KATYState  
TXZip Code  
77494-8420FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1082.06

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27720069

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4953 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANCE, VERNON, , , JR.**

Mailing Address 430 LLOYD LANE

City  
SHREVEPORTState  
LAZip Code  
71106-4741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719310**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANCE, VERNON, , , JR.**

Mailing Address 430 LLOYD LANE

City  
SHREVEPORTState  
LAZip Code  
71106-4741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719312**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANCE, VERNON, , , JR.**

Mailing Address 430 LLOYD LANE

City  
SHREVEPORTState  
LAZip Code  
71106-4741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

496.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719314**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4954 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANCE, VERNON, , , JR.**

Mailing Address 430 LLOYD LANE

City  
SHREVEPORTState  
LAZip Code  
71106-4741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719317**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANCE, VERNON, , , JR.**

Mailing Address 430 LLOYD LANE

City  
SHREVEPORTState  
LAZip Code  
71106-4741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719325**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHESTNEY, CYNTHIA, , ,**

Mailing Address 4120 LYNDAL ROAD

City  
ALTOONAState  
PAZip Code  
16602-1537FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719084**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4955 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CIACCIO, JANE, , ,**Mailing Address **5491 BEECHMONT AVE**  
**APT 506**City  
**CINCINNATI**State  
**OH**Zip Code  
**45230-1160**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**841.25**

Date of Receipt

**02 / 25 / 2025****Transaction ID : SA11A.27719226**

Amount of Each Receipt this Period

**48.93**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CIACCIO, JANE, , ,**Mailing Address **5491 BEECHMONT AVE**  
**APT 506**City  
**CINCINNATI**State  
**OH**Zip Code  
**45230-1160**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**841.25**

Date of Receipt

**02 / 25 / 2025****Transaction ID : SA11A.27720317**

Amount of Each Receipt this Period

**34.65**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLINE, JOHN, P., MR.,**Mailing Address **3 W ST**City  
**LAKE LOTAWANA**State  
**MO**Zip Code  
**64086-9757**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**CLINE WOOD AGENCY**Occupation (for Individual)  
**INSURANCE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**352.56**

Date of Receipt

**02 / 25 / 2025****Transaction ID : SA11A.27720612**

Amount of Each Receipt this Period

**104.10**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►**187.68**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4956 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINS, CAROLE, , ,**

Mailing Address 5715 IVES PL.

City  
RIVERSIDEState  
CAZip Code  
92506-3541FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.92

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719494**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLPO, SARAH, , ,**

Mailing Address P.O. BOX 988

City  
MARSState  
PAZip Code  
16046-0988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.49

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721104**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COOPER, GARY, , ,**

Mailing Address P.O. BOX 547

City  
OAKWOODState  
OHZip Code  
45873-0547FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COOPER FARMSOccupation (for Individual)  
FOOD PROCESSING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721080**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.57



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4957 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COPPLE, CLAIRE, , ,**

Mailing Address 2324 BISMARCK AVE

City  
MANTECAState  
CAZip Code  
95337-7841FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721406

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CORMIER, WILLIAM, , MR.,**

Mailing Address 1025 MAIN ST

City  
LEOMINSTERState  
MAZip Code  
01453-1909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720748

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORUM, SARAH, , ,**

Mailing Address 3258 DUNCAN AV

City  
CLOVISState  
CAZip Code  
93619-5006FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

498.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719949

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4958 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIG, JUDY, , ,**

Mailing Address 4206 S. CANTAMAR DRIVE

City  
SAINT GEORGEState  
UTZip Code  
84790-4862FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721014

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CROSS, KEVIN, , ,**

Mailing Address 44 PAR AVE

City  
PINEDALEState  
WYZip Code  
82941-5310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719392

Amount of Each Receipt this Period

110.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CULBERTSON, LLOYD, , ,**

Mailing Address 10705S SW 69TH CT.

City  
PINECRESTState  
FLZip Code  
33156-3932FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

994.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720623

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

179.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4959 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CULBERTSON, LLOYD, , ,**

Mailing Address 10705S SW 69TH CT.

City  
PINECRESTState  
FLZip Code  
33156-3932FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720625

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CULLENS, JOHN, B., MR.,**

Mailing Address 145 GREEN HILLS ROAD

City  
ATHENSState  
GAZip Code  
30605-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720360

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CULLENS, JOHN, B., MR.,**

Mailing Address 145 GREEN HILLS ROAD

City  
ATHENSState  
GAZip Code  
30605-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

485.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720362

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

149.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4960 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CULLENS, JOHN, B., MR.,**

Mailing Address 145 GREEN HILLS ROAD

City  
ATHENSState  
GAZip Code  
30605-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720365

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CULLENS, JOHN, B., MR.,**

Mailing Address 145 GREEN HILLS ROAD

City  
ATHENSState  
GAZip Code  
30605-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720367

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CULLENS, JOHN, B., MR.,**

Mailing Address 145 GREEN HILLS ROAD

City  
ATHENSState  
GAZip Code  
30605-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

485.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720368

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4961 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CULLENS, JOHN, B., MR.,**

Mailing Address 145 GREEN HILLS ROAD

City  
ATHENSState  
GAZip Code  
30605-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720369

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CULLENS, JOHN, B., MR.,**

Mailing Address 145 GREEN HILLS ROAD

City  
ATHENSState  
GAZip Code  
30605-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720372

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CULLENS, JOHN, B., MR.,**

Mailing Address 145 GREEN HILLS ROAD

City  
ATHENSState  
GAZip Code  
30605-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

485.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720374

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.84

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4962 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CULLENS, JOHN, B., MR.,**

Mailing Address 145 GREEN HILLS ROAD

City  
ATHENSState  
GAZip Code  
30605-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720376

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CULLENS, JOHN, B., MR.,**

Mailing Address 145 GREEN HILLS ROAD

City  
ATHENSState  
GAZip Code  
30605-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720378

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CULLENS, JOHN, B., MR.,**

Mailing Address 145 GREEN HILLS ROAD

City  
ATHENSState  
GAZip Code  
30605-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720380

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4963 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CULLENS, JOHN, B., MR.,**

Mailing Address 145 GREEN HILLS ROAD

City  
ATHENSState  
GAZip Code  
30605-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720389

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CUNNINGHAM, RONALD, , MR.,**

Mailing Address 4368 E 58TH ST

City  
TULSAState  
OKZip Code  
74135-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICAN ELECTRIC POWEROccupation (for Individual)  
IT ENTERPRISE ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720517

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURTIN, DINO, ALLEN, MR.,**

Mailing Address 228 U ST

City  
RIO LINDAState  
CAZip Code  
95673-1337FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1405.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719173

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

218.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4964 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DALLAVERDE, ANGELO, , ,**

Mailing Address 20A HEISZ ST

City  
KINGSTONState  
PAZip Code  
18704-4453FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720322**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DALLAVERDE, ANGELO, , ,**

Mailing Address 20A HEISZ ST

City  
KINGSTONState  
PAZip Code  
18704-4453FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720329**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DALRYMPLE, TERRANCE, D., MR.,**

Mailing Address 1851 OXFORD TRENTON RD

City  
OXFORDState  
OHZip Code  
45056-9158FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

509.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719679**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.99



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4965 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719720**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719725**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719728**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.42

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4966 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719729**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719731**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719875**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4967 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DARLING, GARY, , ,**

Mailing Address 501 E GUIDRY ST

City  
COVINGTONState  
LAZip Code  
70433-3942FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719596**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721071**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721366**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4968 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAVIDSON, JO, , ,**

Mailing Address POBOX336

City  
WASHINGTONState  
OKZip Code  
73093-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720057

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEBARTOLO, JOSEPH, J., MR.,**

Mailing Address 15 SUMMIT PL

City  
STAMFORDState  
CTZip Code  
06906-1034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719857

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEBERARDINIS, RALPH, , ,**

Mailing Address 2210 CLEARVIEW LANE

City  
ASTONState  
PAZip Code  
19014-1605FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

424.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719108

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4969 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEGROODT, RALPH, , ,**

Mailing Address 31661 WELL BOTTOM RD

City  
GALENAState  
MDZip Code  
21635-1334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719581**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DILORENZO, ESTHER, , ,**

Mailing Address 46309 CORDOBA DRIVE

City  
NOVIState  
MIZip Code  
48374-2435FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720803**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIONNE, DOUGLAS, , ,**

Mailing Address 6122 WINDY KNL

City  
WINDCRESTState  
TXZip Code  
78239-2655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

536.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720872**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4970 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIONNE, DOUGLAS, , ,**

Mailing Address 6122 WINDY KNL

City  
WINDCRESTState  
TXZip Code  
78239-2655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721195**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRAZAN, ARTHUR, D., ,**

Mailing Address 330 EAGLE DRIVE

City  
JUPITERState  
FLZip Code  
33477-4066FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719886**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EACK, CRYSTAL, , ,**

Mailing Address 691 IONE AVENUE NORTHEAST

City  
SPRING LAKE PARKState  
MNZip Code  
55432-1146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

394.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719320**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4971 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EASH, ESTHER, , ,**

Mailing Address 420 VILLAGE LN

City  
SOUTH HUTCHINSONState  
KSZip Code  
67505-1734FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.50

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721183**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719582**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720823**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

187.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4972 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720897**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAVES, DARRYL, , ,**

Mailing Address 7700 ELTON ST

City

SAINT LOUIS

State

MO

Zip Code

63123-3806

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.86

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719170**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EBNER, EILEEN, , ,**

Mailing Address 14 ALGIERS LANE

City

CHEEKTOWAGA

State

NY

Zip Code

14225-4704

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

241.18

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719777**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

227.58



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4973 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ECKLEY, ROBERT, , ,**

Mailing Address 275 GRAND SLAM DR.

City  
BELLEFONTEState  
PAZip Code  
16823-4728FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.16

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719701**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELDAR, LUE ANN, , ,**

Mailing Address 1632 HARMON COVE TOWER

City  
SECAUCUSState  
NJZip Code  
07094-1766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AMAZONOccupation (for Individual)  
E-COMMERCE OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.20

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720573**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELENIEWSKI, MARY LOU, , ,**

Mailing Address 5429 KONYA DRIVE

City  
TORRANCEState  
CAZip Code  
90503-1824FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.38

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721412**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4974 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720780**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENGLAND, BILL, , ,**

Mailing Address 18118 MONTEVERDE

City  
SPRING HILLState  
FLZip Code  
34610-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGLAND ASSOCIATESOccupation (for Individual)  
REHABILITATION COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721211**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENNIS, TAMALYN, , ,**

Mailing Address 111 GREEN VALLEY LN

City  
CANONSBURGState  
PAZip Code  
15317-3543FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719534**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4975 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ERIKSEN, WALTER, , ,**

Mailing Address 11 WALTER PLACE

City  
BELLA VISTAState  
ARZip Code  
72714-3214FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720054**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FARRILL, CRAIG, , MR.,**

Mailing Address 162 POLK ROAD 89

City  
MENAState  
ARZip Code  
71953-8940FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VIZIV TECHNOLOGIESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721081**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FERINE, WALTER, , ,**

Mailing Address 116 TIGER LN

City  
ANDERSONState  
SCZip Code  
29626-5757FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720436**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4976 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FINN, PATRICK, , MR., JR.**Mailing Address 15705 LARIMORE PLZ  
APT 2City  
OMAHAState  
NEZip Code  
68116-8801FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719943**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLANAGAN, MICHAEL, , ,**

Mailing Address 2150 EAST WELLINGTON AVENUE

City

SANTA ANA

State

CA

Zip Code

92701-3184

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720059**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City

FOLSOM

State

CA

Zip Code

95630-6172

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719363**

Amount of Each Receipt this Period

7.29

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4977 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRANK, ANDREW, , ,

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720265

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRANK, ANDREW, , ,

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721398

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRESSLE, SHARON, , ,

Mailing Address 158 MAYFAIR AVE

City  
FLORAL PARKState  
NYZip Code  
11001-2349FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAPITOL ELECTRIC CORPOccupation (for Individual)  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719970

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

112.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4978 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRIEDKIN, MONTE, , ,**

Mailing Address 7673 WOOD DUCK DRIVE

City  
BOCA RATONState  
FLZip Code  
33434-5143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.42

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719820**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FULLER, JOHN, D., MR.,**

Mailing Address 279 TOURNAMENT LN.

City  
FREEPORTState  
FLZip Code  
32439-6241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.02

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720516**

Amount of Each Receipt this Period

59.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FULLER, JOHN, D., MR.,**

Mailing Address 279 TOURNAMENT LN.

City  
FREEPORTState  
FLZip Code  
32439-6241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

920.02

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721194**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

187.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4979 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GATES, ALTON, , ,**

Mailing Address 9 MUSKOGEE LANE

City  
DESTINState  
FLZip Code  
32541-4432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GATES WINERYOccupation (for Individual)  
WINE MAKER, PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719920**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GELUSO, FRANK, F., ,**

Mailing Address 1930 SOUTH WESTWOOD

City  
MESAState  
AZZip Code  
85210-5953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
HANDYMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719664**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GHEBREMEDHIN, BERHANE, , ,**

Mailing Address 1520 DOVE CY

City  
PASADENAState  
CAZip Code  
91107-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DPSS LA COUNTYOccupation (for Individual)  
ELIGIBILITY SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1270.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721362**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4980 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIORDANO, MICHAEL, , ,**

Mailing Address 59 YOWAGO AVE

City  
BRANFORDState  
CTZip Code  
06405-5526FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIORDANOOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3029.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719117**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIORDANO, MICHAEL, , ,**

Mailing Address 59 YOWAGO AVE

City  
BRANFORDState  
CTZip Code  
06405-5526FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIORDANOOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3029.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721170**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GISH, NATALIE, , ,**

Mailing Address 18018 MELROSE DRIVE

City  
BUCYRUSState  
KSZip Code  
66013-9090FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STUDENTOccupation (for Individual)  
STUDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719785**

Amount of Each Receipt this Period

190.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

315.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4981 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719280**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719286**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOMBERG, GALINA, , ,**

Mailing Address 96 CARRICK CIR.

City  
HAYWARDState  
CAZip Code  
94542-7912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1414.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719675**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4982 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719999

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOTTLIEB, STEPHEN, , ,**

Mailing Address 705 CORELLI COVE ST

City  
HENDERSONState  
NVZip Code  
89011-5523FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720283

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOTTLIEB, STEPHEN, , ,**

Mailing Address 705 CORELLI COVE ST

City  
HENDERSONState  
NVZip Code  
89011-5523FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

346.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720723

Amount of Each Receipt this Period

26.07

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

76.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4983 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, LINCOLN, I., MR., JR.**Mailing Address 1002 ALTAVITA CT  
APT 210City  
LONGMONTState  
COZip Code  
80503-3684FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719694**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREENSTEIN, LORRAINE, , ,**

Mailing Address 162 ADAMS STREET

City  
DENVERState  
COZip Code  
80206-5239FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PROPERTY MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719075**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIFFIN, WALTER, W., MR.,**

Mailing Address 5213 HAYNES STERCHI RD.

City  
KNOXVILLEState  
TNZip Code  
37912-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

491.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719224**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

154.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4984 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIFFIN, WALTER, W., MR.,**

Mailing Address 5213 HAYNES STERCHI RD.

City  
KNOXVILLEState  
TNZip Code  
37912-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719225

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIFFIN, WALTER, W., MR.,**

Mailing Address 5213 HAYNES STERCHI RD.

City  
KNOXVILLEState  
TNZip Code  
37912-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719235

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRUBB, RENEE, , ,**

Mailing Address 246 TORO CANYON ROAD

City  
CARPINTERIAState  
CAZip Code  
93013-3040FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VILLAGE PROPERTIESOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720738

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

321.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4985 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUDORF, KENNETH, , ,**

Mailing Address 970 CAPE MARCO DR.

City  
MARCO ISLANDState  
FLZip Code  
34145-6399FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1716.06

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721223**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUNN PHILLIPS, BEATRICE, ELVA, MS.,**

Mailing Address 16399 WATSON RD

City  
GUERNEVILLEState  
CAZip Code  
95446-8937FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.75

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720703**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMARAT, NED, , MR.,**

Mailing Address P.O. BOX 32118

City  
SANTA FEState  
NMZip Code  
87594-2118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720611**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

307.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4986 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMILTON, BETTY, , ,**

Mailing Address 18037 STONEBROOK DR

City  
NORTHVILLEState  
MIZip Code  
48168-4345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719807**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMILTON, BILL, , ,**

Mailing Address 7713 KOLMAR AVE

City  
SKOKIEState  
ILZip Code  
60076-3654FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719606**

Amount of Each Receipt this Period

0.45

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMILTON, BILL, , ,**

Mailing Address 7713 KOLMAR AVE

City  
SKOKIEState  
ILZip Code  
60076-3654FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719607**

Amount of Each Receipt this Period

0.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4987 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMLIN, DENNIS, , ,**

Mailing Address 18735 CORSINI DRIVE

City  
SAN ANTONIOState  
TXZip Code  
78258-1629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719253**

Amount of Each Receipt this Period

16.14

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMMONS, JOYCE, , ,**

Mailing Address 3525 NEW DELHI DR.

City  
WINSTON SALEMState  
NCZip Code  
27101-6211FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719876**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARDIN, JOEL, C., MR.,**

Mailing Address 225 MILL RD

City  
CLEARWATERState  
IDZip Code  
83552-5116FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

392.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719139**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4988 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARDY, RICHARD, B., MR.,**

Mailing Address 88 MASONIC HOME RD APT R313

City  
CHARLTONState  
MAZip Code  
01507-3304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.78

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720530

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRIS, SUE, , MS.,**

Mailing Address 6768 SPENCER HWY STE A1

City  
PASADENAState  
TXZip Code  
77505-1726FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE HARRIS AGENCYOccupation (for Individual)  
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719262

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721095

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4989 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721096**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721097**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721101**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4990 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721103**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEATON, HELENE, , MRS.,**

Mailing Address 36496 LOCHDALE

City  
FARMINGTON HILLSState  
MIZip Code  
48335-2189FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719972**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEFFELFINGER, FRANK, , , III**

Mailing Address 8342 CREEKSIDE CIR

City  
MINNEAPOLISState  
MNZip Code  
55437-3838FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MR. FRANK T. HEFFELFINGER IIIOccupation (for Individual)  
PHOTOGRAPHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720667**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4991 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEISTAND, JOHN, , ,**

Mailing Address 614 TIMBERLANE DR

City  
LAKE MARYState  
FLZip Code  
32746-2571FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721178

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERROLD, BARBARA, J., MRS.,**

Mailing Address 3738 MARSBELLA PL

City  
KALAMAZOOState  
MIZip Code  
49006-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
K O PRODUCTSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719129

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIDGES, CAROL, , ,**

Mailing Address 10 KINGS CASTLE

City  
SAN ANTONIOState  
TXZip Code  
78257-1732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720401

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.76

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4992 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOBBS, GAYLE, , MRS.,**

Mailing Address 1 VOLK TER

City  
GREAT FALLSState  
MTZip Code  
59405-4128FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719402

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOBBS, GAYLE, , MRS.,**

Mailing Address 1 VOLK TER

City  
GREAT FALLSState  
MTZip Code  
59405-4128FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719423

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOBBS, GAYLE, , MRS.,**

Mailing Address 1 VOLK TER

City  
GREAT FALLSState  
MTZip Code  
59405-4128FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

451.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719444

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

86.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4993 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOBBS, GAYLE, , MRS.,**

Mailing Address 1 VOLK TER

City  
GREAT FALLSState  
MTZip Code  
59405-4128FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720672

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HODGES, SAM, , ,**

Mailing Address 6202 EAST VOLTAIRE AVENUE

City  
SCOTTSDALEState  
AZZip Code  
85254-3853FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719077

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOILES, PAMELA, , ,**Mailing Address 37 DAVENPORT AVE  
APT 1City  
GREENWICHState  
CTZip Code  
06830-7176FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

382.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721324

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.10

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4994 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOLDER, RICK, , MR.,

Mailing Address 1288 HERITAGE-LANDING DR.

City  
CHATTANOOGAState  
TNZip Code  
37405-4262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DER-KEL, LLCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720413

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOLLINGTON, MARGARET, , ,

Mailing Address 9960 ATRIUM WAY APT 514

City  
JACKSONVILLEState  
FLZip Code  
32225-6447FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719071

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLLINGTON, MARGARET, , ,

Mailing Address 9960 ATRIUM WAY APT 514

City  
JACKSONVILLEState  
FLZip Code  
32225-6447FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719074

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

361.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4995 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLLINGTON, MARGARET, , ,**

Mailing Address 9960 ATRIUM WAY APT 514

City  
JACKSONVILLEState  
FLZip Code  
32225-6447FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.13

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720014**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLINGTON, MARGARET, , ,**

Mailing Address 9960 ATRIUM WAY APT 514

City  
JACKSONVILLEState  
FLZip Code  
32225-6447FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.13

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720081**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLTEN, JAMES, J., MR.,**

Mailing Address 4003 CHESTNUT OAK DR

City  
SMITHTONState  
ILZip Code  
62285-3741FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1366.44

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720208**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

153.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4996 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HORST, TERESA, , MRS.,**

Mailing Address 15906 HOTCHKISS VALLEY RD E

City  
LOUDONState  
TNZip Code  
37774-6069FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719629**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOWARD, BOBBY, , ,**

Mailing Address 3333 SWINDELL RD

City  
PLANT CITYState  
FLZip Code  
33565-2659FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.28

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719721**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOWELL, ANITA, , ,**

Mailing Address 208 VISTA CLIFF CIRCLE

City  
CASTLE ROCKState  
COZip Code  
80104-5527FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

422.62

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719128**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.70



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4997 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOWELL, ANITA, , ,**

Mailing Address 208 VISTA CLIFF CIRCLE

City  
CASTLE ROCKState  
COZip Code  
80104-5527FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721093**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOWELL, STEVEN, J., MR.,**

Mailing Address 7302 REFLECTION RD CT.

City  
WICHITAState  
KSZip Code  
67205-1623FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KANSAS ORTHOPEDIC CENTEROccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719647**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBEK, SUSAN, JANE, ,**

Mailing Address 4 WOODED LANE

City  
ALLENState  
TXZip Code  
75013-2955FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KELLER WILLIAMS REALTYOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721187**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4998 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUGHES, PAUL, F., MR.,**

Mailing Address 7108 S ANDES CIR

City  
CENTENNIALState  
COZip Code  
80016-2110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RAYTHEONOccupation (for Individual)  
SCIENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719473**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUSTAD, JANET, , ,**

Mailing Address 51806 PELICAN POINT DRIVE

City  
DETROIT LAKESState  
MNZip Code  
56501-9405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

898.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720500**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUTCHINSON, ROBERT, , MR.,**

Mailing Address 808 CRIMSON RIDGE TRL

City  
FUQUAY VARINAState  
NCZip Code  
27526-2718FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

444.10

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720452**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4999 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IREDALE, NANCY, L., MS.,**

Mailing Address P.O. BOX 5084

City  
INCLINE VILLAGEState  
NVZip Code  
89450-5084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.60

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719934**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IVERS, DONALD, , MR.,**

Mailing Address 1511 PAUL SPRING PARKWAY

City  
ALEXANDRIAState  
VAZip Code  
22308-1143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

723.10

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719497**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACKSON, DAN, , ,**

Mailing Address 110 WEST TAYLOR DRIVE

City  
GARLANDState  
TXZip Code  
75040-7962FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
O'REILLY AUTO PARTSOccupation (for Individual)  
STOCKER-MERCHANDISER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721157**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5000 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACOBSON, SHARYN, , ,**

Mailing Address 4681 1ST STREET NE #401

City  
SAINT PETERSBURGState  
FLZip Code  
33703-4947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720715

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACOBSON, SHARYN, , ,**

Mailing Address 4681 1ST STREET NE #401

City  
SAINT PETERSBURGState  
FLZip Code  
33703-4947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721410

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JARZEBOWSKI, MACIE, , ,**

Mailing Address 753 E SHORE DR.

City  
SUMMERLAND KEYState  
FLZip Code  
33042-4512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719754

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

206.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5001 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEFFERY, ROGER, , MR.,**

Mailing Address 18 SLEEPING COLT PL

City  
SPRINGState  
TXZip Code  
77389-7885FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721196**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JENNINGS, CHARLES, , ,**

Mailing Address 12323 BUTTERBROOK LANE

City  
FORT WAYNEState  
INZip Code  
46818-8517FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719124**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JERNG, RICHARD, , ,**

Mailing Address 201 FOLSOM STREET APT 31E

City  
SAN FRANCISCOState  
CAZip Code  
94105-5084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

649.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720219**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5002 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSTON, JAMES, , ,**

Mailing Address 45 HUNTLEIGH DRIVE

City  
ALBANYState  
NYZip Code  
12211-1173FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720555**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON MORTON, VALERIE, , ,**

Mailing Address 3391 EAST ORANGE BLOSSOM WAY

City  
ONTARIOState  
CAZip Code  
91761-3926FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2782.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719107**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, JEANNETTE, , ,**

Mailing Address 873 CRESTVIEW CIRCLE

City  
FORT LAUDERDALEState  
FLZip Code  
33327-1847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

562.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719143**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

396.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5003 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANTNER, JEFFREY, , ,**

Mailing Address 200 TULIPHILL ROAD

City  
TEMPLEState  
PAZip Code  
19560-9401FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CJKANT RESOURCE GROUP INCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721315**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAUFFMAN, CLAUDIA, , MS.,**

Mailing Address 3607 HONEYWOOD DRIVE

City  
JOHNSON CITYState  
TNZip Code  
37604-1480FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.65

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720938**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAUFFMAN, CLAUDIA, , MS.,**

Mailing Address 3607 HONEYWOOD DRIVE

City  
JOHNSON CITYState  
TNZip Code  
37604-1480FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

386.65

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720985**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5004 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEEN, JACK, W., MR.,**

Mailing Address 7016 DA VINCI

City  
COLLEYVILLEState  
TXZip Code  
76034-8262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WNM COMMUNICATIONSOccupation (for Individual)  
CHAIRMAN OF THE BOARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1433.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721060**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KENEMER, KAREN, , ,**

Mailing Address P.O. BOX 187

City  
ROCKY FACEState  
GAZip Code  
30740-0187FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720699**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KENEMER, KAREN, , ,**

Mailing Address P.O. BOX 187

City  
ROCKY FACEState  
GAZip Code  
30740-0187FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720707**

Amount of Each Receipt this Period

7.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

142.93



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5005 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KENEMER, KAREN, , ,**

Mailing Address P.O. BOX 187

City  
ROCKY FACEState  
GAZip Code  
30740-0187FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720710**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KENEMER, KAREN, , ,**

Mailing Address P.O. BOX 187

City  
ROCKY FACEState  
GAZip Code  
30740-0187FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720712**

Amount of Each Receipt this Period

7.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KENYON, TONI, , ,**

Mailing Address 83 CONCORD RD

City  
BEDFORDState  
MAZip Code  
01730-2036FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

982.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719677**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

126.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5006 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLAPPER, BENJAMIN, S., MR.,**

Mailing Address 40 E 80TH ST

City  
NEW YORKState  
NYZip Code  
10075-0230FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721100**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KLEIN, MICHAEL, F., MR.,**

Mailing Address 5220 KLEE MILL RD S

City  
SYKESVILLEState  
MDZip Code  
21784-9257FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CHARLES A. KLEIN AND SONSOccupation (for Individual)  
MECHANICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4330.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720825**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNOWLES, KAREN, , ,**

Mailing Address 308 GRAVES DRIVE

City  
FORESTState  
VAZip Code  
24551-2622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CENTRA HEALTHOccupation (for Individual)  
SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

794.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719475**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

295.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5007 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNOWLES, KAREN, , ,**

Mailing Address 308 GRAVES DRIVE

City  
FORESTState  
VAZip Code  
24551-2622FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTRA HEALTHOccupation (for Individual)  
SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

794.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719766

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNOWLES, KAREN, , ,**

Mailing Address 308 GRAVES DRIVE

City  
FORESTState  
VAZip Code  
24551-2622FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTRA HEALTHOccupation (for Individual)  
SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

794.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719784

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719282

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5008 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KORBELL, JOHN, CHARLES, MR.,**

Mailing Address 222 PARK HILL DR

City  
SAN ANTONIOState  
TXZip Code  
78212-2512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720218**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRAUSE, CAROLYN, , ,**Mailing Address 2100 CIRCLE DR.  
APT 221City  
SCOTTSBLUFFState  
NEZip Code  
69361-1778FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER/FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.06

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719601**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KRAUSS, SAMUEL, , ,**

Mailing Address 3903 NORTH LAWDALE AVENUE

City  
CHICAGOState  
ILZip Code  
60618-3107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOCAL 1Occupation (for Individual)  
IRONWORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.20

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719800**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5009 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LACKEY, ANN, , ,**

Mailing Address 1117 SPRUCE STREET

City  
LAKE OSWEGO

State  
OR

Zip Code  
97034-6153

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.48

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

**Transaction ID : SA11A.27720250**

Amount of Each Receipt this Period

1.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAGOW, ROXANN, , ,**

Mailing Address 6204 SHADOW MT DR

City  
AUSTIN

State  
TX

Zip Code  
78731-4151

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

**Transaction ID : SA11A.27720119**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAHAM, JAMIL, , ,**

Mailing Address 6702 BALMORAL OVERLOOK

City  
NEW MARKET

State  
MD

Zip Code  
21774-6952

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

**Transaction ID : SA11A.27721377**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

183.68

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5010 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LALONDE, RICHARD , , ,**

Mailing Address 3332 NW 47TH CT

City  
OCALA

State  
FL

Zip Code  
34482-8322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

938.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

**Transaction ID : SA11A.27720160**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANCASTER, HARRY , , ,**

Mailing Address 550 LEGACY COURT UNIT 9

City  
NORWALK

State  
IA

Zip Code  
50211-9729

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

**Transaction ID : SA11A.27720133**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LARUE, PATRICIA , , ,**

Mailing Address 3137-B GOLDEN YEARS HOMESTEAD DR

City  
NEW HAVEN

State  
IN

Zip Code  
46774-3003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

**Transaction ID : SA11A.27721225**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

139.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5011 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LARUE, PATRICIA, , ,**

Mailing Address 3137-B GOLDEN YEARS HOMESTEAD DR

City  
NEW HAVENState  
INZip Code  
46774-3003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721227

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LARUE, PATRICIA, , ,**

Mailing Address 3137-B GOLDEN YEARS HOMESTEAD DR

City  
NEW HAVENState  
INZip Code  
46774-3003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721228

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LARUE, PATRICIA, , ,**

Mailing Address 3137-B GOLDEN YEARS HOMESTEAD DR

City  
NEW HAVENState  
INZip Code  
46774-3003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721230

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9.22

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5012 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719511**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.06

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719169**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

696.06

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719988**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.54



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5013 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEIGH, JOHN, , MR.,**

Mailing Address 2926 LAUREL PARK HWY

City  
HENDERSONVILLEState  
NCZip Code  
28739-8980FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719515**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIKES, KATHY, , ,**

Mailing Address 3184 RESERVOIR DR.

City  
SIMI VALLEYState  
CAZip Code  
93065-1014FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719744**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINDENBERG, LARRY, , MR.,**

Mailing Address 846 DOERFLER DR.

City  
KIMBERLYState  
WIZip Code  
54136-2304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

592.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719343**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5014 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINDENBERG, LARRY, , MR.,**

Mailing Address 846 DOERFLER DR.

City  
KIMBERLYState  
WIZip Code  
54136-2304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721244

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOGGINS, BRUCE, , ,**

Mailing Address 900 AVE L P.O. BOX 519

City  
SUNRAYState  
TXZip Code  
79086-0519FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ISCOccupation (for Individual)  
ELECTRICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721268

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOOMIS, JOSEPH, , ,**

Mailing Address 2711 LOWER PODUNK ROAD

City  
NEW MILFORDState  
PAZip Code  
18834-7417FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

213.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720115

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

149.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5015 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LORING, ARTHUR, , ,**Mailing Address 1100 S FLAGLER DR  
UNIT 1201City  
WEST PALM BEACHState  
FLZip Code  
33401-6539FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720695**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUDEMAN, ROGER, , ,**

Mailing Address 2291 W PARK AVE

City  
CHANDLERState  
AZZip Code  
85224-4035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721351**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUO, LEI, , ,**

Mailing Address 23 QUEEN ANNE CT

City  
MILLBRAEState  
CAZip Code  
94030-1328FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LEI LUO DDS INCOccupation (for Individual)  
HEALTH PROFESSIONAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719545**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5016 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUTTENBERGER, RUDY, , ,**

Mailing Address 17426 N 2ND PL

City  
PHOENIXState  
AZZip Code  
85022-1805FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

793.30

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720066**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MADER, PATRICIA, M., MRS.,**

Mailing Address 1710 HUDSON CIR

City  
GRAND ISLANDState  
NEZip Code  
68801-7473FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.11

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719981**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAGRUDER, SHERYL, , ,**

Mailing Address 576 CONCORD LANE

City  
KALISPELLState  
MTZip Code  
59901-5111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1103.39

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720708**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

186.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5017 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAGUIRE, JOANNE, , MS.,**

Mailing Address 144 E 84TH ST

City  
NEW YORKState  
NYZip Code  
10028-2004FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719896**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANCHESTER, PETER, , ,**

Mailing Address 4967 BEACON PLACE

City  
FREELANDState  
WAZip Code  
98249-9689FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720926**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANCHESTER, PETER, , ,**

Mailing Address 4967 BEACON PLACE

City  
FREELANDState  
WAZip Code  
98249-9689FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720928**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5018 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANN, CATHY, C., MISS,**

Mailing Address 6101 S 25TH ST.

City  
LINCOLNState  
NEZip Code  
68512-2010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.05

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719172**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719179**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, BARBARA, , ,**

Mailing Address 607 W CRAFT ST

City  
ROBINSONState  
ILZip Code  
62454-1133FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

431.95

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720090**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

169.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5019 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, CHRISTOPHER, , MR.,**

Mailing Address 2794 CARLARIS RD

City  
SAN MARINOState  
CAZip Code  
91108-1715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AC MARTINOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720719**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721055**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASSU, GLORIA, , ,**

Mailing Address 30665 TENNESSEE ST

City  
ROSEVILLEState  
MIZip Code  
48066-1319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

832.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721125**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5020 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASTRO, MABEL, , ,**

Mailing Address 4616 PRAIRIE POINT BOULEVARD

City  
KISSIMMEEState  
FLZip Code  
34746-6364FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

889.10

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719689**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATHIS, JAMES, , ,**

Mailing Address 100 POLO FIELDS CHASE

City  
WARNER ROBINSState  
GAZip Code  
31088-1612FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720307**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MC DONALD, MELODY, L., MRS.,**

Mailing Address 1098 VERNIER PLACE

City  
STANFORDState  
CAZip Code  
94305-1027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

532.14

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721090**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

260.25



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5021 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCLUGGAGE, VICTORIA, , ,**

Mailing Address 1415 PARKVIEW AVENUE

City  
PASADENAState  
CAZip Code  
91103-2361FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719099**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCELREATH, JAMES, , ,**

Mailing Address 1701SHADYDIDE

City  
EAST LIVERPOOLState  
OHZip Code  
43920-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720093**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCFERRIN, JAMES, W., MR.,**

Mailing Address 125 BEVERLY ROAD NE

City  
ATLANTAState  
GAZip Code  
30309-2655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
U. S. ELECTRICOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720459**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5022 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCNEESE, PATRICK, , ,**

Mailing Address 6912 EAST 53RD PLACE

City  
TULSAState  
OKZip Code  
74145-7505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720847

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. METHENY, WILLIAM, , ,**

Mailing Address P.O. BOX 414

City  
BRIDGERState  
MTZip Code  
59014-0414FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720267

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIKULA, GAIL, , ,**

Mailing Address P.O. BOX 8

City  
HIRAMState  
OHZip Code  
44234-0008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

331.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719163

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

98.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5023 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, ANNE, , ,**

Mailing Address 6 RONNA RD

City  
GLOUCESTERState  
MAZip Code  
01930-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1006.86

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27720077

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27720036

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27720526

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5024 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720923**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721392**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLS, KENNETH, B., ,**

Mailing Address 110 SAINTSBURY PL

City  
LEXINGTONState  
NCZip Code  
27295-2085FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

836.95

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719995**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5025 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLS, KENNETH, B., ,**

Mailing Address 110 SAINTSBURY PL

City  
LEXINGTONState  
NCZip Code  
27295-2085FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

836.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720643**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLSPAUGH, THEODORE, , ,**

Mailing Address 4538 S PENINSULA DR.

City  
PONCE INLETState  
FLZip Code  
32127-7006FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PANNESMA CO LTDOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721247**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721005**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5026 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721238**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTEGRANDE, FAYE, , ,**Mailing Address 321 N LARCHMONT BL  
824City  
LOS ANGELESState  
CAZip Code  
90004-6408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720489**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUKHERJEE, DOROTHY, S., MRS.,**

Mailing Address 1445 RIVIERA DRIVE

City  
KISSIMMEEState  
FLZip Code  
34744-6647FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BUSINESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720458**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.01

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5027 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MUSSER, FRED, , MR.,

Mailing Address 4480 CRYSTAL DR

City  
BROOMFIELDState  
COZip Code  
80023-8138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719644

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NAMORATO, MICHAEL, , ,

Mailing Address 129 LAKEWAY DR.

City  
OXFORDState  
MSZip Code  
38655-9600FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719181

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEAL, LONNIE, DAVID, ,

Mailing Address 7128 NORTH 63DRIVE

City  
GLENDALEState  
AZZip Code  
85301-2385FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719289

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

79.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5028 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEEDHAM, ALFRED, , ,**Mailing Address 10 WINTER ST  
608City  
QUINCYState  
MAZip Code  
02169-8754FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720905

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSEN, PATRICIA, , ,**

Mailing Address 10026 LLEWELLYN COURT

City  
FAIRFAXState  
VAZip Code  
22032-2713FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DODOccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720039

Amount of Each Receipt this Period

22.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NESTLEROTH, DAVID, , ,**Mailing Address 12001 MARKET ST  
APT 445City  
RESTONState  
VAZip Code  
20190-6223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JACOBSOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719346

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

58.37



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5029 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NESTLEROTH, DAVID, , ,**Mailing Address 12001 MARKET ST  
APT 445City  
RESTONState  
VAZip Code  
20190-6223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JACOBSOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719348

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NESTLEROTH, DAVID, , ,**Mailing Address 12001 MARKET ST  
APT 445City  
RESTONState  
VAZip Code  
20190-6223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JACOBSOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719349

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NESTLEROTH, DAVID, , ,**Mailing Address 12001 MARKET ST  
APT 445City  
RESTONState  
VAZip Code  
20190-6223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JACOBSOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719354

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

11.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5030 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEUHOFF, PAUL, , ,**

Mailing Address 2918 MARSHALL BOULEVARD

City  
SULLIVANS ISLANDState  
SCZip Code  
29482-9637FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GSP MARKETING TECHNOLOGYOccupation (for Individual)  
FOUNDER /CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719337**

Amount of Each Receipt this Period

49.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEWELL, LINDA, , ,**

Mailing Address 4324 SUMMER STAR LANE

City  
FORT WORTHState  
TXZip Code  
76244-4934FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719756**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEWHOUSE, BRENDA, , ,**

Mailing Address 665 S PEAR ORCHARD RD

City  
RIDGELANDState  
MSZip Code  
39157-4861FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

317.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720284**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5031 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOBLE, CRISTINA, HEEREN, ,**

Mailing Address 1200 FIFTH AVENUE

City  
NEW YORK

State  
NY

Zip Code  
10029-5208

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1168.54

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

**Transaction ID : SA11A.27721369**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOGARA, CLEOPATRA, , ,**

Mailing Address 855 DONALD ST

City  
SONOMA

State  
CA

Zip Code  
95476-4608

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.30

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

**Transaction ID : SA11A.27720125**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NORIGE, KEVIN, , ,**

Mailing Address 90 CHESHIRE DR

City  
SOUTH WINDSOR

State  
CT

Zip Code  
06074-2265

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
DENTISTRY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

**Transaction ID : SA11A.27721288**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

283.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5032 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOTTINGHAM, MARGARETE, , ,**

Mailing Address PO BOX 236

City  
CARTERState  
MTZip Code  
59420-0236FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

**Transaction ID : SA11A.27720334**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOTTINGHAM, MARGARETE, , ,**

Mailing Address PO BOX 236

City  
CARTERState  
MTZip Code  
59420-0236FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

**Transaction ID : SA11A.27720341**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NOTTINGHAM, MARGARETE, , ,**

Mailing Address PO BOX 236

City  
CARTERState  
MTZip Code  
59420-0236FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

**Transaction ID : SA11A.27720347**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5033 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOTTINGHAM, MARGARETE, , ,**

Mailing Address PO BOX 236

City  
CARTERState  
MTZip Code  
59420-0236FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.18

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720356**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

589.96

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720455**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'FLYNN, ARMINDA, , ,**

Mailing Address 12864 BISCAYNE BLVD

City  
N. MIAMIState  
FLZip Code  
33181-2007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

992.53

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721338**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5034 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ODOM, TAMELA, , ,**

Mailing Address 403 SANFORD ROAD

City  
ANDALUSIAState  
ALZip Code  
36420-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.98

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721310**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ONG, KENNETH, , ,**

Mailing Address 3250 SAN PABLO AVE

City  
OAKLANDState  
CAZip Code  
94608-4261FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719982**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OPDYCKE, NICOLA, , ,**

Mailing Address 2202 MIRAMONTE WAY

City  
NAPLESState  
FLZip Code  
34105-3074FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719416**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5035 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

**Transaction ID : SA11A.27720486**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

**Transaction ID : SA11A.27720487**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

**Transaction ID : SA11A.27720490**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

9.09

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5036 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

**Transaction ID : SA11A.27720492**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

**Transaction ID : SA11A.27720493**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

**Transaction ID : SA11A.27720496**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.36



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5037 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALMER, JEAN, B., MRS.,**

Mailing Address 224 ARNOLD AVE

City  
SYRACUSEState  
NYZip Code  
13210-3714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721171

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARIKH, PARMANAND, K., DR.,**

Mailing Address 6015,DIVIDE ROAD

City  
NIAGARA FALLSState  
NYZip Code  
14305-1410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MOUNT SAINT MARY'S HOSPITAL, LEWISTONOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720394

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKER, LELA, , ,**

Mailing Address 1304 N. HERRITAGE ST.

City  
KINSTONState  
NCZip Code  
28501-3838FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719783

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

204.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5038 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.11

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720683**

Amount of Each Receipt this Period

1.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PASSAROTTI, DONNA, , ,**

Mailing Address 23 EBERSOHL CIR

City  
WHITEHOUSE STATIONState  
NJZip Code  
08889-4027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.16

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719709**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PATTON, GEORGE, L., ,**

Mailing Address 1009 FAIRWAY CIRCLE

City  
JONESBOROState  
ARZip Code  
72401-4350FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VAOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720524**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5039 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720257**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721013**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721015**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

69.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5040 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721017

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721018

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, WILMUTH, , MRS.,**

Mailing Address 5400 BEXAR AVE E

City  
HAMILTONState  
ALZip Code  
35570-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1990.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721020

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5041 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PERALTA, ROBERT, , ,**

Mailing Address 1473 PENASCO ROAD NORTHEAST

City  
RIO RANCHOState  
NMZip Code  
87144-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THE HOME DEPOTOccupation (for Individual)  
RETAIL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.49

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720541**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRIN, CAROL, , MRS.,**

Mailing Address 16 ROCKY COVE RD

City  
LEXINGTONState  
SCZip Code  
29072-9763FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

921.59

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720952**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERS, ELLIE, , ,**

Mailing Address 302 US HWY 385 NORTH

City  
SEMINOLEState  
TXZip Code  
79360-7119FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARM RANCH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

712.50

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719089**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5042 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORGState  
VAZip Code  
23860-8229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720010

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORGState  
VAZip Code  
23860-8229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720203

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETRITZ, GEORGE, L., ,**

Mailing Address 4811 ROGERS ROAD

City  
BEULAHState  
MIZip Code  
49617-9562FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721067

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5043 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719186**

Amount of Each Receipt this Period

86.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHILLIPS, KAREN, , ,**

Mailing Address 13888 STATE ROAD 32 EAST

City  
NOBLESVILLEState  
INZip Code  
46060-8858FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719797**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PHILLIPS, KAREN, , ,**

Mailing Address 13888 STATE ROAD 32 EAST

City  
NOBLESVILLEState  
INZip Code  
46060-8858FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

680.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720113**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5044 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719197**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PLACA, ALAN, , ,**

Mailing Address 200 EAGLETON ESTATE BLVD

City  
PALM BEACH GARDENSState  
FLZip Code  
33418-8411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIULIANI PARTNERS LLCOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.94

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720794**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PLUMMER, ROBERT, KEMP, ,**

Mailing Address 4308 VILLAGE DR

City  
TRINITYState  
NCZip Code  
27370-9492FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.04

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721167**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.81



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5045 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PLUMMER, ROBERT, KEMP, ,**

Mailing Address 4308 VILLAGE DR

City  
TRINITYState  
NCZip Code  
27370-9492FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721174**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719913**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720916**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5046 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PORTER, RAYMOND, E., MR.,**

Mailing Address 15444 SILVAN GLEN DR.

City  
DUMFRIESState  
VAZip Code  
22025-1012FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720170

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRADO, JORGE, A., MR.,**

Mailing Address 630 W VALENCIA MESA DR.

City  
FULLERTONState  
CAZip Code  
92835-4004FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719333

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRYOR, TREVA, , MRS.,**

Mailing Address 13 HARDING DR.

City  
SEARCYState  
ARZip Code  
72143-5704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721374

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

183.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5047 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PYLE, DON, , ,**

Mailing Address 4 BLAISDELL ST

City  
AUGUSTAState  
MEZip Code  
04330-6902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.66

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721153

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RANALLO, JINGER, , ,**

Mailing Address 813 LEEDS STREET

City  
BAKERSFIELDState  
CAZip Code  
93311-1144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720409

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RANDALL, HELEN, , ,**

Mailing Address 13249 SW 190TH ST

City  
ROSE HILLState  
KSZip Code  
67133-8519FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

442.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719482

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5048 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RANDALL, HELEN, , ,**

Mailing Address 13249 SW 190TH ST

City  
ROSE HILLState  
KSZip Code  
67133-8519FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.92

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719487**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RANDALL, WAYNE, C., MR.,**

Mailing Address 19857 GREENVIEW DR.

City  
WOODBIDGEState  
CAZip Code  
95258-9231FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UNITED PALLET SERVICES, INC.Occupation (for Individual)  
PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719742**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RANSOM, JAMES, H., DR.,**

Mailing Address 319 WOODLAND RD.

City  
SEWICKLEYState  
PAZip Code  
15143-1048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

890.27

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721243**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5049 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RANSOM, JAMES, H., DR.,**

Mailing Address 319 WOODLAND RD.

City  
SEWICKLEYState  
PAZip Code  
15143-1048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721245**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RANSOM, JAMES, H., DR.,**

Mailing Address 319 WOODLAND RD.

City  
SEWICKLEYState  
PAZip Code  
15143-1048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721248**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RANSOM, JAMES, H., DR.,**

Mailing Address 319 WOODLAND RD.

City  
SEWICKLEYState  
PAZip Code  
15143-1048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

890.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721267**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5050 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RANSOM, JAMES, H., DR.,**

Mailing Address 319 WOODLAND RD.

City  
SEWICKLEYState  
PAZip Code  
15143-1048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.27

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721271

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RANSOM, JAMES, H., DR.,**

Mailing Address 319 WOODLAND RD.

City  
SEWICKLEYState  
PAZip Code  
15143-1048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.27

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721275

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721110

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

76.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5051 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721112**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719300**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719303**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5052 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REESE, THOMAS, , ,**

Mailing Address 23976 STAGECOACH ROAD

City  
GENESEOState  
ILZip Code  
61254-8361FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720392**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REINHARD, ROSEMARIE, , MR.,**

Mailing Address 2755 FALCON STREET

City  
EAST MEADOWState  
NYZip Code  
11554-4318FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719646**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RENSKI, RONALD, , ,**

Mailing Address 2700 OCEAN SHORE BLVD, UNIT 403

City  
ORMOND BEACHState  
FLZip Code  
32176-2395FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719648**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.49



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5053 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REYES, JOSE, , ,**

Mailing Address 929 WEST MOUNTAIN STREET

City  
GLENDALEState  
CAZip Code  
91202-1045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27719445

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REYNOLDS, GLENN, R., MR.,**

Mailing Address 5 BOLINGBROKE DRIVE

City  
TOMS RIVERState  
NJZip Code  
08757-4330FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27721140

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIBA, BRADLEY, A., MR.,**

Mailing Address 513 4TH AVE. NE

City  
SARTELLState  
MNZip Code  
56377-2123FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.82

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27719429

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.55

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5054 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICH, JULIE, , ,**

Mailing Address 13700 SKYLINE CIRCLE

City  
SHAKOPEE

State  
MN

Zip Code  
55379-9382

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
PROPERTY OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.38

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

**Transaction ID : SA11A.27720664**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RICHARDSON, CHRIS, , ,**

Mailing Address 4001 W SAM HOSUTON PKWY N STE 100

City  
HOUSTON

State  
TX

Zip Code  
77043-1236

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BLAZER BUILDING

Occupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.50

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

**Transaction ID : SA11A.27719294**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIGGS, JAMIE, , ,**

Mailing Address 16544 STATE ROUTE 93 S

City  
LOGAN

State  
OH

Zip Code  
43138-8836

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.20

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

**Transaction ID : SA11A.27719817**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

158.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5055 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIGGS, JAMIE, , ,**

Mailing Address 16544 STATE ROUTE 93 S

City  
LOGANState  
OHZip Code  
43138-8836FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719823

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBBINS, RAY, L., MRS.,**

Mailing Address 114 SHADY VALLEY DR.

City  
CHESTERFIELDState  
MOZip Code  
63017-2626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719658

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719130

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5056 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719203

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719206

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719211

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

65.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5057 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.57

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719214**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.57

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719216**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

829.57

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719218**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5058 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719222

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719227

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, JIM, , ,**

Mailing Address 443 CRABAPPLE DR.

City  
HOWARDState  
OHZip Code  
43028-9575FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721258

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5059 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROHOSKY, ROBERT, , ,**

Mailing Address 3739 HONEYCOMB DR

City  
CONYERSState  
GAZip Code  
30094-3662FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.40

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27720316

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROLKER, JOHN, G., MR.,**

Mailing Address 14 W SARATOGA ST

City  
BALTIMOREState  
MDZip Code  
21201-4207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.50

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27720099

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.70

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025

Transaction ID : SA11A.27720548

Amount of Each Receipt this Period

2.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

201.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5060 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUTHER, PATRICIA, M., ,**

Mailing Address 300 CHURCH ST

City  
MATAWANState  
NJZip Code  
07747-1522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720371

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAGALE, MOEIFAGA, , ,**

Mailing Address 7356 TOOMA STREET

City  
SAN DIEGOState  
CAZip Code  
92139-2939FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719811

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAGALE, MOEIFAGA, , ,**

Mailing Address 7356 TOOMA STREET

City  
SAN DIEGOState  
CAZip Code  
92139-2939FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719816

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

61.74



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5061 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAHAGIAN, ISHKHAN, K., MR.,**

Mailing Address 101 HIGH DESERT

City  
IRVINEState  
CAZip Code  
92602-1892FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.30

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719485**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANFORD, MARCELLA, FRANCIS, MS.,**

Mailing Address 12593 CANBY AVE

City  
FARIBAULTState  
MNZip Code  
55021-7254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.88

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719597**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.80

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719409**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5062 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720506**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHLOSSTEIN, GARY, B., MR.,**

Mailing Address W1586 COUNTY RD. KK

City  
ALMAState  
WIZip Code  
54610-8404FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719576**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHNEIDER, LYNN, , ,**

Mailing Address 18891 6485 RD

City  
MONTROSEState  
COZip Code  
81403-7890FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720930**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5063 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHNEIDER, RUSSELL, , ,**

Mailing Address 2918 RIVERSIDE TR

City  
TEMPLEState  
TXZip Code  
76502-5914FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BELL COUNTYOccupation (for Individual)  
COMMISSIONER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719801**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHNEIDER, RUSSELL, , ,**

Mailing Address 2918 RIVERSIDE TR

City  
TEMPLEState  
TXZip Code  
76502-5914FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BELL COUNTYOccupation (for Individual)  
COMMISSIONER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719848**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHOFIELD, KATHLEEN, S., ,**

Mailing Address 1716 NORTHEAST NORTH STREET

City  
HERMISTONState  
ORZip Code  
97838-1138FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

335.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719239**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5064 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHROEDER, STEPHEN, , ,**

Mailing Address 20722 348TH STREET

City  
TAYLORS FALLSState  
MNZip Code  
55084-2848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.54

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721414**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHRUM, VALERIE, , ,**

Mailing Address 8654 WEDGEWOOD LN N

City  
MAPLE GROVEState  
MNZip Code  
55369-4615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.80

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720319**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHUCKER, JEFFREY, D., MR.,**

Mailing Address 451 MOUNTAIN RD

City  
KEMPTONState  
PAZip Code  
19529-9336FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BAILEY WOOD PRODUCTSOccupation (for Individual)  
GEN. MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721280**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5065 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCISSOM, TOMMY, , MR.,**Mailing Address 656 DORIS AVE  
#BCity  
OXNARDState  
CAZip Code  
93030-4637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720675

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCISSOM, TOMMY, , MR.,**Mailing Address 656 DORIS AVE  
#BCity  
OXNARDState  
CAZip Code  
93030-4637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721222

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCONTRINO, JOSEPH, , ,**

Mailing Address 6424 CANAL BLVD

City  
NEW ORLEANSState  
LAZip Code  
70124-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720120

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

202.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5066 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEITER, JOHN, H., MR.,**

Mailing Address 3293 PADARO LN

City  
CARPINTERIAState  
CAZip Code  
93013-1116FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1166.96

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719249**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEITER, JOHN, H., MR.,**

Mailing Address 3293 PADARO LN

City  
CARPINTERIAState  
CAZip Code  
93013-1116FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1166.96

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719366**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEITER, JOHN, H., MR.,**

Mailing Address 3293 PADARO LN

City  
CARPINTERIAState  
CAZip Code  
93013-1116FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1166.96

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719419**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5067 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SELIGER, PENNY, , MRS.,**

Mailing Address 1020 BENTREE CIRCLE

City  
ANCHORAGEState  
AKZip Code  
99504-1700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720773**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SELIG, ROBERT, J., ,**

Mailing Address 65 JOLLEY DR APT 331

City  
BLOOMFIELDState  
CTZip Code  
06002-4251FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719116**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SELIG, ROBERT, J., ,**

Mailing Address 65 JOLLEY DR APT 331

City  
BLOOMFIELDState  
CTZip Code  
06002-4251FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

639.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719121**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5068 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEXTON, STEPHEN, M., MR.,**

Mailing Address 2728 IRON CT

City  
FREMONTState  
NEZip Code  
68025-6167FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719940

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEXTON, STEPHEN, M., MR.,**

Mailing Address 2728 IRON CT

City  
FREMONTState  
NEZip Code  
68025-6167FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719941

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEXTON, STEPHEN, M., MR.,**

Mailing Address 2728 IRON CT

City  
FREMONTState  
NEZip Code  
68025-6167FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

348.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719945

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

98.92



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5069 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHAKOOR, JACK, , ,**

Mailing Address 370 BLOOMFIELD AVE

City  
CALDWELLState  
NJZip Code  
07006-4905FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720211

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHEIKH, JAMIL, , ,**Mailing Address 1345 AVENUE OF THE AMERICAS  
2ND FLOORCity  
NEW YORKState  
NYZip Code  
10105-0302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JSARCHITECTSOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719631

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHELTON, SHARON, K., MRS.,**

Mailing Address 9692 LONGMONT DRIVE

City  
HOUSTONState  
TXZip Code  
77063-1029FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719930

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

330.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5070 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719958**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719963**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIEWERT, CHARLES, R., ,**

Mailing Address 6067 HOGAN DR N

City  
KEIZERState  
ORZip Code  
97303-7445FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720990**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5071 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMILER, DENNIS, , MR.,**Mailing Address 12975 AGUSTIN PL  
APT 139City  
PLAYA VISTAState  
CAZip Code  
90094-2398FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720525**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, MIKE, , ,**

Mailing Address 3 WEST VALE LANE

City  
PADUCAHState  
KYZip Code  
42001-6725FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.65

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719120**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SNYDER, CARLA, , ,**

Mailing Address 15725 S. INDEPENDENCE CT., APT. 2W

City  
OAK FORESTState  
ILZip Code  
60452-3249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CCSSOccupation (for Individual)  
RESIDENTIAL MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

546.96

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720263**

Amount of Each Receipt this Period

37.48

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5072 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOERGEL, GREGG, S., MR.,**

Mailing Address 116 SOUTHERN VALLEY CT

City  
MARSState  
PAZip Code  
16046-9306FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PPM CONSULTINGOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720214**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SORTMAN, DONNA, , ,**

Mailing Address 121 DOGWOOD LANE

City

WILLIAMSPORT

State

PA

Zip Code

17701-8828

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721156**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STALNAKER, BEN, , DR.,**

Mailing Address 10424 TAM O SHANTER RD

City

PENSACOLA

State

FL

Zip Code

32514-8305

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720562**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5073 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STALNAKER, BEN, , DR.,**

Mailing Address 10424 TAM O SHANTER RD

City  
PENSACOLAState  
FLZip Code  
32514-8305FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.75

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720570**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STALNAKER, BEN, , DR.,**

Mailing Address 10424 TAM O SHANTER RD

City  
PENSACOLAState  
FLZip Code  
32514-8305FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.75

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721128**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

776.13

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720531**

Amount of Each Receipt this Period

1.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5074 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEBBINS, TAMMY, , ,**

Mailing Address 1616 VICTORY COURT

City  
PROSPECTState  
KYZip Code  
40059-9175FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SPEECH PATHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719554

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719048

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEWART, WILLIAM, , ,**

Mailing Address 5526 STONEGATE RD

City  
DALLASState  
TXZip Code  
75209-3522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719175

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5075 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRAWBRIDGE, ROBERT, ALLEN, MR.,**

Mailing Address 120 VISION PARK BLVD 143

City  
CONROEState  
TXZip Code  
77384-3022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720264**

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRAWBRIDGE, ROBERT, ALLEN, MR.,**

Mailing Address 120 VISION PARK BLVD 143

City  
CONROEState  
TXZip Code  
77384-3022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720269**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STREBECK, JULIA, , ,**

Mailing Address 5315 CR 922

City  
NEVADAState  
TXZip Code  
75173-6161FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721120**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5076 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720156

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720423

Amount of Each Receipt this Period

49.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720641

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

111.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5077 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SYLVESTRI, RONALD, J., MR.,**

Mailing Address 333 WEST STREET # 5

City  
DARIENState  
CTZip Code  
06820-4038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.65

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721303**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SZALOCZI, IRENE, , ,**

Mailing Address 27 GRACE ST

City  
FORDSState  
NJZip Code  
08863-2101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719745**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TEBYANIAN, SOHRAB, , ,**

Mailing Address 700 BELFAST TERR.

City  
CRETEState  
ILZip Code  
60417-1263FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720279**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5078 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TEDOLDI, ROBERT, L., MR., SR.**

Mailing Address 1438 WOODSTREAM DR.

City  
OLDSMARState  
FLZip Code  
34677-4832FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721040**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TERAN, ALAN, , ,**

Mailing Address 2126 KNOLLWOOD DR

City  
BOULDERState  
COZip Code  
80302-4706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719285**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THARP, MORRIS, , ,**

Mailing Address 15243 RD 192

City  
PORTERVILLEState  
CAZip Code  
93257-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
E M THARP INCOccupation (for Individual)  
TRUCKS DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

742.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720874**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

422.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5079 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THERRIEN, THOMAS, , ,**

Mailing Address 413 WHITNEY HARBOR

City  
WINDSORState  
COZip Code  
80550-6163FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TOM THERRIENOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720988**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMA, BARBARA, , ,**

Mailing Address 47 CORDOBA POINT

City  
SUNRISE BEACHState  
MOZip Code  
65079-5810FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.79

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720471**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, BONNIE, , ,**

Mailing Address 115 HOLBROOK DR.

City  
HUNTSVILLEState  
ALZip Code  
35806-4084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

512.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720460**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

234.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5080 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN BERGEN, RICHARD, T., MR.,**

Mailing Address 2824 GABLER AVE SE

City  
BUFFALOState  
MNZip Code  
55313-5202FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719778

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAN BERGEN, RICHARD, T., MR.,**

Mailing Address 2824 GABLER AVE SE

City  
BUFFALOState  
MNZip Code  
55313-5202FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721019

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN BERGEN, RICHARD, T., MR.,**

Mailing Address 2824 GABLER AVE SE

City  
BUFFALOState  
MNZip Code  
55313-5202FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721032

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5081 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN ZANDT, LEE, A., ,**

Mailing Address 21630E 103 ST SOUTH

City  
BROKEN ARROWState  
OKZip Code  
74014-3655FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720523**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VANDER HAAG, RUTH, , ,**

Mailing Address 408 SUNRISE AVE

City  
SANBORNState  
IAZip Code  
51248-1122FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720939**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAVKEN, SHERI, , ,**

Mailing Address 39140 GRAY SQUIRREL RD.

City  
TEMECULAState  
CAZip Code  
92592-9071FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719110**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1135.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5082 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VITALI, THEODORE, , ,**

Mailing Address 9802 WINTER NIGHT LANE

City  
SAINT LOUISState  
MOZip Code  
63126-3246FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ST. LOUIS UNIVERSITYOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.90

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721193**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720450**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.96

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721205**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5083 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721418**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VON SCHIMMELMANN, KAREN, , ,**

Mailing Address 12521 GRITSTONE DRIVE

City  
DENTONState  
TXZip Code  
76207-5747FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720312**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAHMAN, GERALD, , ,**

Mailing Address PO BOX 789

City  
ALMAState  
ARZip Code  
72921-0789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

577.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721084**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5084 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALDRUP, JAMES, , , III**

Mailing Address 2423 WINTHROP RD

City  
TALLAHASSEEState  
FLZip Code  
32308-0524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STREAM ENERGY, INC.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1215.13

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721190**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKER, LUCINDA, , ,**

Mailing Address 67 IRVING AVENUE, P.O. BOX 507

City  
HYANNIS PORTState  
MAZip Code  
02647-0507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.04

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720466**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALKER, LUCINDA, , ,**

Mailing Address 67 IRVING AVENUE, P.O. BOX 507

City  
HYANNIS PORTState  
MAZip Code  
02647-0507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

610.04

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720863**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.08



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5085 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALSH, JEANNE, , ,**

Mailing Address 141 BIRKETT STREET

City  
CARBONDALEState  
PAZip Code  
18407-1618FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

638.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719743**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEATHERMAN, GLENNA, F., ,**

Mailing Address 853 S NEWHAVEN DR.

City  
ORANGEState  
CAZip Code  
92869-5443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719415**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEAVER, JANET, , ,**

Mailing Address 245 ROUNTREE

City  
CEDAR CITYState  
UTZip Code  
84720-3534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721421**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5086 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELLS, JOSEPH, , MR., JR.**Mailing Address 151 FAIRVIEW DR.  
APT 358City  
LITITZState  
PAZip Code  
17543-8164FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719971**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEST, DEBORAH, A., MS.,**Mailing Address 2750 S PRESTON RD  
STE 116City  
CELINAState  
TXZip Code  
75009-3807FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1041.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719524**

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEST, THERESA, , ,**

Mailing Address 148 MAPLE CV

City  
ONALASKAState  
TXZip Code  
77360-7016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

586.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720648**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1154.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5087 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHEELER, BRUCE, , ,**

Mailing Address 7800 SOUTHWEST PARKWAY

City  
AUSTINState  
TXZip Code  
78735-6113FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720094

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITE, SHIRLEY, LEE, MS.,**

Mailing Address 807 BRAZOS BEND DR.

City  
CEDAR PARKState  
TXZip Code  
78613-7505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720296

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITE, STEPHEN, , ,**

Mailing Address 9345 OSAGE CIRCLE

City  
GARDEN RIDGEState  
TXZip Code  
78266-2060FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720159

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5088 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITEMORE, BEBE, , ,**

Mailing Address 4785 MURFREESBORO ROAD

City  
ARRINGTONState  
TNZip Code  
37014-9171FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719160

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITEMORE, BEBE, , ,**

Mailing Address 4785 MURFREESBORO ROAD

City  
ARRINGTONState  
TNZip Code  
37014-9171FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719425

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITEMORE, BEBE, , ,**

Mailing Address 4785 MURFREESBORO ROAD

City  
ARRINGTONState  
TNZip Code  
37014-9171FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720529

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5089 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITEMORE, BEBE, , ,**

Mailing Address 4785 MURFREESBORO ROAD

City  
ARRINGTONState  
TNZip Code  
37014-9171FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27721411**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WIEGAND, DAVID, , ,**

Mailing Address 501 SADDLE DR

City  
NASHVILLEState  
TNZip Code  
37221-1905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719687**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

371.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27720183**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5090 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WIGGINS, JONATHAN, P., MR.,**

Mailing Address 1522 S 18TH ST APT2

City  
LAFAYETTEState  
INZip Code  
47905-2071FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PURDUE UNIVERSITYOccupation (for Individual)  
ELECTRONICS TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719674

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, BETTY, , ,**

Mailing Address 311 HARPER LOOP

City  
GRANTS PASSState  
ORZip Code  
97527-5339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27719916

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMS, CATHERINE, L., ,**

Mailing Address PO BOX 127

City  
SCHERTZState  
TXZip Code  
78154-0127FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

286.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720288

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5091 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, MIKE, , ,**

Mailing Address 3003 CANEMILL RD IN

City  
LANCASTERState  
SCZip Code  
29720-9569FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.16

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720301**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, MIKE, , ,**

Mailing Address 3003 CANEMILL RD IN

City  
LANCASTERState  
SCZip Code  
29720-9569FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.16

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720932**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, JEAN, , ,**

Mailing Address 5644 ARAL DRIVE

City  
LAKELANDState  
FLZip Code  
33805-9615FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.62

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721108**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5092 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOOD, LOCKETT, E., MR.,**

Mailing Address 21 S SUNSET ST

City  
LONGMONTState  
COZip Code  
80501-5843FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AVIVID WATER TECHNOLOGYOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27720233

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, CAROLYN, , ,**

Mailing Address 30 LISA AVE

City  
POPLAR BLUFFState  
MOZip Code  
63901-9094FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721408

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WULF, JAMES, , ,**Mailing Address 19300 HIGHWAY 17  
LOT 7City  
WAYNESVILLEState  
MOZip Code  
65583-3392FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA11A.27721012

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.89



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5093 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YENSEL, PATRICIA, , ,**

Mailing Address 4811 RASPBERRY CIRCLE

City  
RAVENNAState  
OHZip Code  
44266-7843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.49

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27720488**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNG, PATRICIA, , ,**

Mailing Address 9940 PREMIERE VIEW CIR

City  
HAGERSTOWNState  
MDZip Code  
21740-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.42

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27719464**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YOUNG, PATRICIA, , ,**

Mailing Address 9940 PREMIERE VIEW CIR

City  
HAGERSTOWNState  
MDZip Code  
21740-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.42

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2025**Transaction ID : SA11A.27721124**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

26.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5094 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZWAAN, ROBERT, , ,**

Mailing Address 3516 RHOADS AVENUE

City  
NEWTOWN SQUAREState  
PAZip Code  
19073-3718FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PETCARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11A.27719512**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11C.27723353**

Amount of Each Receipt this Period

83859.78

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724403**

Amount of Each Receipt this Period

22.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5095 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724404**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724406**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724407**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5096 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST

City  
BELLINGHAMState  
WAZip Code  
98225-2247FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724415

Amount of Each Receipt this Period

22.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724987

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMS, ZEREE, , ,**

Mailing Address P.O. BOX 3650

City  
WILLIAMSBURGState  
VAZip Code  
23187-3650FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LIVING WATER COUNSELINGOccupation (for Individual)  
THERAPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725823

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

157.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5097 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADKINS, MARY, , ,**

Mailing Address 416 SW 725TH RD

City  
CHILHOWEEState  
MOZip Code  
64733-9229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724414

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADKINS, MARY, , ,**

Mailing Address 416 SW 725TH RD

City  
CHILHOWEEState  
MOZip Code  
64733-9229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724662

Amount of Each Receipt this Period

105.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALBANESE, WILLIAM, , ,**

Mailing Address 3 BIRD HILL LANE

City  
SANTA CRUZState  
CAZip Code  
95060-1801FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

309.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725000

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

156.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5098 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALBERS, GREGG, , ,**

Mailing Address 220 FOX BRIAR LN

City  
MADISON HEIGHTSState  
VAZip Code  
24572-2770FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CVFPOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.85

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723971**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALBERS, GREGG, , ,**

Mailing Address 220 FOX BRIAR LN

City  
MADISON HEIGHTSState  
VAZip Code  
24572-2770FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CVFPOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.85

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723981**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.88

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27726180**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5099 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724286**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, JANET, , MS.,**

Mailing Address 2905 MOCKINGBIRD TRL

City  
CASPERState  
WYZip Code  
82604-3641FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.42

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724256**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, MIKE, , ,**

Mailing Address 1620 CARNEGIE WAY

City  
EL DORADO HLSState  
CAZip Code  
95762-5814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WESTWOOD HOMES, INC.Occupation (for Individual)  
HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.54

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724519**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5100 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDREWS, WILLIAM, F., MR.,**

Mailing Address 1409 MORAN RD

City  
FRANKLINState  
TNZip Code  
37069-6301FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725985**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANTOSIEWICZ, KAZ, , ,**

Mailing Address 3 AUTUMN STREET

City  
SPRINGFIELDState  
VTZip Code  
05156-3402FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.08

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724499**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AQUAVELLA, JAMES, , DR.,**

Mailing Address 10 HEARTHSTONE RD

City  
PITTSFORDState  
NYZip Code  
14534-1118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UNIVERSITY OF ROCHESTEROccupation (for Individual)  
OPHTHALMOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

482.30

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726100**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5101 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARGENTIERI, JOANN, , ,**

Mailing Address BOX 9512

City  
FORT LAUDERDALEState  
FLZip Code  
33310-9512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725731

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARONCHICK, ELIZABETH, , ,**

Mailing Address 5310 NORTH OCEAN DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33404-2568FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724969

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ASH, VIRGINIA, , ,**Mailing Address 4 HARBOUR ISLE DR.  
103City  
FORT PIERCEState  
FLZip Code  
34949-2756FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724310

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5102 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ATKINS, LEONARD, , ,**

Mailing Address PMB 8067

City  
BLACK BUTTE RANCHState  
ORZip Code  
97759-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724619**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AUSTIN, PAUL, , ,**

Mailing Address 311 SUGAR BERRY CIRCLE

City  
HOUSTONState  
TXZip Code  
77024-7268FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725619**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BABCOCK, PAUL, , ,**

Mailing Address 3 MEADOWBROOK WAY

City  
SAG HARBORState  
NYZip Code  
11963-1301FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724814**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

254.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5103 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BALDWIN, JAMES, , MR.,**

Mailing Address 9 MAURA LANE

City  
DANBURYState  
CTZip Code  
06810-7118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.65

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724219

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BANCROFT, HUGH, , MR., III**

Mailing Address P.O. BOX 25

City  
RANCHO SANTA FEState  
CAZip Code  
92067-0025FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1026.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725727

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARBIN, LOUIS, , ,**

Mailing Address 132 ROYAL LN

City  
POOLERState  
GAZip Code  
31322-3958FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

612.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725696

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

331.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5104 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARBIN, LOUIS, , ,**

Mailing Address 132 ROYAL LN

City  
POOLERState  
GAZip Code  
31322-3958FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725715**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARR, JONNA, , ,**

Mailing Address 4516 WEYBRIDGE DRIVE

City  
COLUMBIAState  
MOZip Code  
65203-6429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724428**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEAUDETT, JAMES, , ,**

Mailing Address 1743 DEEPWOOD COT

City  
ROCHESTERState  
MIZip Code  
48307-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

728.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723770**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

317.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5105 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BELL, WAYNE, , ,**

Mailing Address 461 PHYLLIS DRIVE

City  
EAGLE POINTState  
ORZip Code  
97524-9017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723744**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERG, ELIZABETH, , ,**Mailing Address 555 MAIN ST  
APT 606SCity  
NEW YORKState  
NYZip Code  
10044-0165FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724594**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERRY, JOHN, , ,**

Mailing Address 15825 OLD OLEANDER DR

City  
CHARLOTTEState  
NCZip Code  
28278-5005FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

273.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725976**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5106 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERRY, ROBERT, , ,**

Mailing Address P O BOX 213

City  
MARISSAState  
ILZip Code  
62257-0213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726012

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724787

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724797

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

253.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5107 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724878

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725617

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725645

Amount of Each Receipt this Period

0.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5108 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725895

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726074

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BICE, JOAN, , MS.,**

Mailing Address 501 JOHNSON ST.

City  
DEL RIOState  
TXZip Code  
78840-5619FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

891.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723542

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.50



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5109 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BINGHAM, GLENN, S., MR.,**

Mailing Address 721 STEWARTS RD

City  
LANEXAState  
VAZip Code  
23089-8804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723625**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BINIENDA, MARY, E., MS.,**Mailing Address 28413 ABBEY LN  
APT 172City  
NEW HUDSONState  
MIZip Code  
48165-2804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725870**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BINIENDA, MARY, E., MS.,**Mailing Address 28413 ABBEY LN  
APT 172City  
NEW HUDSONState  
MIZip Code  
48165-2804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

844.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725874**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5110 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BISHOP, LUTHER, A., MR.,**

Mailing Address 1102 CENTER ST

City  
MILFORDState  
OHZip Code  
45150-1327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725543

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BITTINGER, REBECCA, , ,**

Mailing Address 429 HOOD ST.

City  
CHAMBERSBURGState  
PAZip Code  
17201-1142FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724863

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BJORK, ARNOLD, , MR.,**

Mailing Address 3700 E PEONY PL. APT. 304

City  
SIOUX FALLSState  
SDZip Code  
57103-7628FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725883

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

374.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5111 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLAHNIK, PATRICIA, C., ,**

Mailing Address 258 N WEST END BLVD, #312

City  
QUAKERTOWNState  
PAZip Code  
18951-2324FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725746**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOGGS, JOHN, R., MR.,**

Mailing Address 3900 RAILWAY AVENUE

City  
EVERETTState  
WAZip Code  
98201-3840FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DEEP SEA FISHERIESOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725605**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BORDELON, CURTIS, , ,**

Mailing Address 11 MEADOW ROSE PL

City  
SPRINGState  
TXZip Code  
77382-1298FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RSI CHEMICALSOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1041.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724640**

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1113.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5112 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725722**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725737**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725742**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.77

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5113 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725871**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725876**

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725878**

Amount of Each Receipt this Period

3.96

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12.12

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5114 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTON

State  
TX

Zip Code  
77077-3846

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

**02** / **26** / **2025**

**Transaction ID : SA11A.27725880**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTON

State  
TX

Zip Code  
77077-3846

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

**02** / **26** / **2025**

**Transaction ID : SA11A.27725884**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUGHER, MARY, LOU, ,**

Mailing Address 103 CIRCLE DR.

City  
MAYFIELD

State  
KY

Zip Code  
42066-6902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

**02** / **26** / **2025**

**Transaction ID : SA11A.27725165**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

118.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5115 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYD, JULIA, , ,**

Mailing Address 25 HALDY AVE.

City  
COLUMBUSState  
OHZip Code  
43204-2656FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.26

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725235**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, JULIA, , ,**

Mailing Address 25 HALDY AVE.

City  
COLUMBUSState  
OHZip Code  
43204-2656FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.26

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725968**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYERT, THOMAS, C., MR.,**

Mailing Address 6415 READ RD

City  
SUWANEEState  
GAZip Code  
30024-4780FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.20

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724317**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5116 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRADFORD, ROBERT, L., MR.,**

Mailing Address 697 HEATHER WAY LANE

City  
THOMASVILLEState  
GAZip Code  
31757-1144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL DIAGNOSTICSOccupation (for Individual)  
PHYSICIAN ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726212**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725677**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, DAN, , ,**

Mailing Address 19410 99TH STREET CT E

City  
BONNEY LAKEState  
WAZip Code  
98391-5955FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723399**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.12



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5117 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, DENNIS, , ,**

Mailing Address 3022 REDWOOD AVENUE

City  
LAKELANDState  
FLZip Code  
33803-4345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

642.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726096**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, DENNIS, , ,**

Mailing Address 3022 REDWOOD AVENUE

City  
LAKELANDState  
FLZip Code  
33803-4345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

642.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726098**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, MOLLIE, , ,**

Mailing Address 1172 MAIN ST. P.O. BOX 124

City  
LITTLE MOUNTAINState  
SCZip Code  
29075-0124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7202.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724542**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

134.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5118 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUCKLEW, TERRENCE, , MR.,**

Mailing Address 721 CORONADO AVE

City  
CORONADOState  
CAZip Code  
92118-2033FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725741**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUNN, KAY, , ,**

Mailing Address 1908 GAINESWOOD DR

City  
TUSCALOOSAState  
ALZip Code  
35406-3558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724144**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURGERT, JANEAL, , ,**

Mailing Address 5 N 1600 W

City  
WEST POINTState  
UTZip Code  
84015-8061FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

626.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723983**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

221.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5119 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURNS, MICHAEL, J., ,**

Mailing Address 7287 HORIZON DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725517

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUSTARD, ANN, , ,**

Mailing Address 4512 GREENVIEW RD.

City  
TRENT WOODSState  
NCZip Code  
28562-7634FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724149

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUTLER, SUSAN, , ,**

Mailing Address 6438 NORTH DESERT WIND CIRCLE

City  
TUCSONState  
AZZip Code  
85750-0978FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723517

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

73.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5120 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CALABRIA, ANN, , ,**

Mailing Address 416 WALKFINDERS CRT

City  
WILMINGTONState  
NCZip Code  
28412-7771FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724165

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723539

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724713

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

213.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5121 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724715

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724716

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724717

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

139.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5122 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724720

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724722

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724725

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5123 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724728

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724736

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724740

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

218.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5124 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724752

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725418

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725420

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

181.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5125 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725421

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725422

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725425

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5126 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725426**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725429**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725431**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5127 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725433

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725435

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725687

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5128 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725710**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAPESTRO, PAULA, , ,**

Mailing Address P.O. BOX 791

City  
RANCHO SANTA FEState  
CAZip Code  
92067-0791FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FAR WEST WATER & SEWER, INCOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725326**

Amount of Each Receipt this Period

79.20

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNEY, JOSEPH, , MR.,**

Mailing Address 1371 WELLAND DR.

City  
ROCHESTERState  
MIZip Code  
48306-4826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726101**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5129 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNEY, JOSEPH, , MR.,**

Mailing Address 1371 WELLAND DR.

City  
ROCHESTERState  
MIZip Code  
48306-4826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726105

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARNEY, JOSEPH, , MR.,**

Mailing Address 1371 WELLAND DR.

City  
ROCHESTERState  
MIZip Code  
48306-4826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726107

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNEY, JOSEPH, , MR.,**

Mailing Address 1371 WELLAND DR.

City  
ROCHESTERState  
MIZip Code  
48306-4826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726109

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5130 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNEY, JOSEPH, , MR.,**

Mailing Address 1371 WELLAND DR.

City  
ROCHESTERState  
MIZip Code  
48306-4826FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.93

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27726112**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTINO, MARTIN, , ,**

Mailing Address 1192 NORTH HIGH STR

City  
EAST HAVENState  
CTZip Code  
06512-1022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27726031**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723595**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5131 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723669**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723865**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724133**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

85.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5132 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724157**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724373**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724380**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

25.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5133 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

**Transaction ID : SA11A.27724465**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

**Transaction ID : SA11A.27724687**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

**Transaction ID : SA11A.27725130**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5134 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDEN

State  
AL

Zip Code  
35901-4055

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
COMPASSUS HOSPICE

Occupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

**02** / **26** / **2025**

**Transaction ID : SA11A.27725282**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDEN

State  
AL

Zip Code  
35901-4055

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
COMPASSUS HOSPICE

Occupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

**02** / **26** / **2025**

**Transaction ID : SA11A.27725295**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDEN

State  
AL

Zip Code  
35901-4055

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
COMPASSUS HOSPICE

Occupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

**02** / **26** / **2025**

**Transaction ID : SA11A.27725424**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

15.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5135 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDEN

State  
AL

Zip Code  
35901-4055

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICE

Occupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27725653**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDEN

State  
AL

Zip Code  
35901-4055

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPASSUS HOSPICE

Occupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27725990**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARR, M, KIRK, ,**

Mailing Address 62 PROSPECT RDG

City  
RIDGEFIELD

State  
CT

Zip Code  
06877-5127

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.98

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27724844**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

44.39

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5136 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARR, M, KIRK, ,**

Mailing Address 62 PROSPECT RDG

City  
RIDGEFIELDState  
CTZip Code  
06877-5127FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724850**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARR, M, KIRK, ,**

Mailing Address 62 PROSPECT RDG

City  
RIDGEFIELDState  
CTZip Code  
06877-5127FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724854**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CASSENTI, JEAN, , ,**

Mailing Address 29 ARNOLD DR

City  
TOLLANDState  
CTZip Code  
06084-2810FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

583.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723960**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5137 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723836

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CEDERHOLM, BECKY, , ,**

Mailing Address 21 OGLETHORPE LN

City  
HILTON HEADState  
SCZip Code  
29926-4724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723862

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAKNIS, GEORGE, , ,**

Mailing Address 616 SEA OATS DR

City  
DESTINState  
FLZip Code  
32541-2418FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724871

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

103.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5138 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723504**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723635**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723641**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

50.63

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5139 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723643

Amount of Each Receipt this Period

28.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723647

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANG, ILPOONG, , ,**

Mailing Address 15015 SANFORD AV, 2K

City  
FLUSHINGState  
NYZip Code  
11355-1044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

835.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723649

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

49.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5140 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLARK, WILLIAM, , ,

Mailing Address 5040 GOLDEN CIRCLE

City  
DENTONState  
TXZip Code  
76208-3552FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723803

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLAVEL, ROBERT, L., MR.,

Mailing Address 827 CARILLON DR.

City  
BARTLETTState  
ILZip Code  
60103-4596FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725108

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLEMENTS, ASHLEY, , ,

Mailing Address 3950 WHEELER ROAD

City  
BAY CITYState  
MIZip Code  
48706-1857FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CLEMENTS CONTRACTINGOccupation (for Individual)  
OFFICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

585.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723749

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

181.09



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5141 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINS, CAROLE, , ,**

Mailing Address 5715 IVES PL.

City  
RIVERSIDEState  
CAZip Code  
92506-3541FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723600**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724333**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724349**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5142 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724354**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONRAD, STUART, W., MR.,**

Mailing Address 8522 FREDERICK DR.

City  
DE SOTOState  
KSZip Code  
66018-7110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724560**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723364**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5143 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOOD

State  
IN

Zip Code  
46142-3722

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

**Transaction ID : SA11A.27723398**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOOD

State  
IN

Zip Code  
46142-3722

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

**Transaction ID : SA11A.27723401**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOOD

State  
IN

Zip Code  
46142-3722

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

**Transaction ID : SA11A.27723426**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

46.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5144 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726021**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COPELAND, LAMMOT, , ,**

Mailing Address P.O. BOX 1992

City  
WILMINGTONState  
DEZip Code  
19899-1992FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ASSOCIATES INTERNATIONALOccupation (for Individual)  
BUS.EXEC.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723695**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORNELIUSON, KAYE, , ,**

Mailing Address 5456 N WOODSON AVENUE

City  
FRESNOState  
CAZip Code  
93711-2548FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PHILIP P CORNELIUSONOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723692**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5145 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIGO, JACQUELINE, L., MS.,**

Mailing Address 1049 SUMMIT DR

City  
MOUNT VERNONState  
OHZip Code  
43050-9576FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1371.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725917**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIGO, JACQUELINE, L., MS.,**

Mailing Address 1049 SUMMIT DR

City  
MOUNT VERNONState  
OHZip Code  
43050-9576FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1371.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725933**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIG, JUDY, , ,**

Mailing Address 4206 S. CANTAMAR DRIVE

City  
SAINT GEORGEState  
UTZip Code  
84790-4862FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

353.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724557**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5146 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIS, JUDY, L., MRS.,**

Mailing Address 405 KEYS LANE

City  
HEPHZIBAHState  
GAZip Code  
30815-5411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725281**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CREEKMORE, CHARLES, , ,**

Mailing Address 4480 BELLA VISTA CIRCLE

City  
FARMINGTONState  
NMZip Code  
87401-9200FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CONOCOPHILLIPSOccupation (for Individual)  
LANDMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724724**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CROZIER, MARILYN, , ,**

Mailing Address 11928 FARWELL ROAD

City  
PHILADELPHIAState  
PAZip Code  
19154-3419FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725381**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5147 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAHIN, JOHN, , ,**

Mailing Address 224 RIDGEWOOD ST

City  
ALTAMONTE SPRINGSState  
FLZip Code  
32701-7613FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725046**

Amount of Each Receipt this Period

24.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAMON, CAROLYN, J., MS.,**

Mailing Address POB 791719

City  
PAIAState  
HIZip Code  
96779-1719FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723762**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723912**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5148 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724278**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725981**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.68

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724435**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.13



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5149 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724695

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725836

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEGRISSELLES, JANET, , ,**

Mailing Address 14638 SAGAMORE COURT

City  
FORT MYERSState  
FLZip Code  
33908-4912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

426.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723636

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5150 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DENHOFF, DIANE, K., ,**

Mailing Address 1908 STATE ROUTE 19

City  
WELLSVILLEState  
NYZip Code  
14895-9740FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.26

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723543**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DILLON, RICHARD, , ,**

Mailing Address 81-43 267STREET

City  
GLEN OAKSState  
NYZip Code  
11004-1531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
770 PARK AVE CORP.Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.68

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725761**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DILLON, RICHARD, , ,**

Mailing Address 81-43 267STREET

City  
GLEN OAKSState  
NYZip Code  
11004-1531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
770 PARK AVE CORP.Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.68

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725771**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5151 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIXON, JOSEPH, , ,**

Mailing Address 2414 NORTHERN OAK DR

City  
BRASELTONState  
GAZip Code  
30517-6057FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724151

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DODGE, WILLIAM, , ,**

Mailing Address 226 OATLAND LAKE RD

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-4339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726044

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DONOVAN, ANNE, , ,**

Mailing Address 4 WEDGE LANE

City  
SELDENState  
NYZip Code  
11784-3309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

498.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725072

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5152 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOREN, HARVEY, F., MR.,**

Mailing Address 123 WASHINGTON ST

City  
DEDHAMState  
MAZip Code  
02026-2031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726025**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRAZAN, ARTHUR, D., ,**

Mailing Address 330 EAGLE DRIVE

City  
JUPITERState  
FLZip Code  
33477-4066FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725703**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUKE, DAVID, , ,**

Mailing Address 31395 AVENIDA DEL REPOSO

City  
TEMECULAState  
CAZip Code  
92591-1780FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726219**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5153 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNCAN, CHARLES, L., MR.,**

Mailing Address 202 PRESERVATION CIRCLE

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-8220FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725858**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNLEVY, PATRICIA, , ,**

Mailing Address 5121 BROWNSTONE DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-6028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.90

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723532**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNLEVY, PATRICIA, , ,**

Mailing Address 5121 BROWNSTONE DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-6028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.90

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723555**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5154 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNLEVY, PATRICIA, , ,**

Mailing Address 5121 BROWNSTONE DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-6028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.90

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723572**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUTCHER, MICHAEL, A., MR.,**

Mailing Address 6628 TANGLEWOOD RD

City  
SAN DIEGOState  
CAZip Code  
92111-4146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.31

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723565**

Amount of Each Receipt this Period

7.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EADES, LINDA, , ,**

Mailing Address 14250 STATE ROUTE JJ

City  
WEST PLAINSState  
MOZip Code  
65775-5834FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.55

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724820**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.71

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5155 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EDGINGTON, CAROL, L., ,**

Mailing Address 5580 TAMBERLANE CIR.

City  
PALM BCH GDNSState  
FLZip Code  
33418-4107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

819.43

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725008**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EGER, RICHARD, , ,**

Mailing Address 212 WASHINGTON AVE, APT 905

City  
TOWSONState  
MDZip Code  
21204-4701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1076.36

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725980**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELAS BOADO, MARIO, , ,**

Mailing Address 40120 SAGEWOOD DR

City  
PALM DESERTState  
CAZip Code  
92260-2321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

413.43

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724513**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5156 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELAS BOADO, MARIO, , ,**

Mailing Address 40120 SAGEWOOD DR

City  
PALM DESERTState  
CAZip Code  
92260-2321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724700**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EVANS, LINDA, , ,**

Mailing Address 130 CRESCENT AVE. #306

City  
SUNNYVALEState  
CAZip Code  
94087-2765FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723745**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EVANS, LINDA, , ,**

Mailing Address 130 CRESCENT AVE. #306

City  
SUNNYVALEState  
CAZip Code  
94087-2765FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723751**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.65



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5157 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EVANS, LINDA, , ,**

Mailing Address 130 CRESCENT AVE. #306

City  
SUNNYVALEState  
CAZip Code  
94087-2765FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723766**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EVERETT, BARRY, , ,**

Mailing Address 1503 LINCOLN CREEK RD

City  
ROCHESTERState  
WAZip Code  
98579-8922FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723549**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EWING, DONNA, , MS.,**

Mailing Address 18106 REDBUD CIRCLE

City  
FOUNTAIN VALLEYState  
CAZip Code  
92708-5753FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723898**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

128.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5158 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EWING, DONNA, , MS.,**

Mailing Address 18106 REDBUD CIRCLE

City  
FOUNTAIN VALLEYState  
CAZip Code  
92708-5753FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.61

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723986**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EWING, DONNA, , MS.,**

Mailing Address 18106 REDBUD CIRCLE

City  
FOUNTAIN VALLEYState  
CAZip Code  
92708-5753FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.61

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723998**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EWING, DONNA, , MS.,**

Mailing Address 18106 REDBUD CIRCLE

City  
FOUNTAIN VALLEYState  
CAZip Code  
92708-5753FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.61

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725894**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

29.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5159 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAULKNER, WAYNE, , ,**

Mailing Address 62 APRIL WIND DR. S.

City  
MONTGOMERYState  
TXZip Code  
77356-5966FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SNC LAVALINOccupation (for Individual)  
I&E DESIGNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724510**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FEIGENBAUM, ROBERT, , MR.,**

Mailing Address 339 AVALON DRIVE

City  
SOUTH SAN FRANCISCOState  
CAZip Code  
94080-5604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COVENANT AVIATION SECURITYOccupation (for Individual)  
TRANSPORTATION SECURITY OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724293**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFFState  
AZZip Code  
86005-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

709.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723451**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5160 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFFState  
AZZip Code  
86005-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.05

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27726189**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISHER, PAMELA, , ,**

Mailing Address 1565 LONGS GAP RD

City  
CARLISLEState  
PAZip Code  
17013-8658FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1016.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725791**

Amount of Each Receipt this Period

237.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLACK, LUCILLE, , ,**

Mailing Address 1207 CAMPBELLAVE

City  
LYNCHBURGState  
VAZip Code  
24501-2815FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

293.34

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725371**

Amount of Each Receipt this Period

23.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

271.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5161 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLACK, LUCILLE, , ,**

Mailing Address 1207 CAMPBELLAVE

City  
LYNCHBURGState  
VAZip Code  
24501-2815FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725461**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLANAGAN, MICHAEL, , ,**

Mailing Address 2150 EAST WELLINGTON AVENUE

City  
SANTA ANAState  
CAZip Code  
92701-3184FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724170**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLANAGAN, MICHAEL, , ,**

Mailing Address 2150 EAST WELLINGTON AVENUE

City  
SANTA ANAState  
CAZip Code  
92701-3184FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

614.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724185**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5162 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724223

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724230

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724231

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

117.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5163 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724236

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724238

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724243

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.84

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5164 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724244

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724250

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724259

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

139.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5165 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724314

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724316

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724320

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5166 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724322**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724324**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724329**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.94

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5167 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINT

State  
FL

Zip Code  
33064-7339

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27724332**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINT

State  
FL

Zip Code  
33064-7339

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27724339**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINT

State  
FL

Zip Code  
33064-7339

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27724346**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

95.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5168 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724348**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724351**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724363**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5169 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FOX, JOHN, , ,**

Mailing Address 3724 WAINFLEET DRIVE

City  
RICHMONDState  
VAZip Code  
23235-1764FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724622

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FOX, MICHAEL, , ,**Mailing Address 552 S RACCOON RD  
APT H18City  
YOUNGSTOWNState  
OHZip Code  
44515-3632FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724042

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRASHRI, PAQSOR, , ,**

Mailing Address 82 HACKBERRY PLACE

City  
CLIFTONState  
NJZip Code  
07013-3629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724518

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5170 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRIEDMAN, RICHARD, , MR.,**Mailing Address 213 S WOODS MILL RD  
APT 4201City  
CHESTERFIELDState  
MOZip Code  
63017-3504FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TELEPHONE DOCTOROccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723432**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRITZ, JOHN, , MR.,**

Mailing Address P.O. BOX 3115

City  
BIG BEAR LAKEState  
CAZip Code  
92315-3115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724961**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FULLER, DONNY, , ,**

Mailing Address 8004 NW 152ND ST

City  
EDMONDState  
OKZip Code  
73013-6079FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VALIANT COMPANIES INCOccupation (for Individual)  
TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725225**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5171 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLOWAY, JIM, , ,**

Mailing Address 6308 PARK AVENUE

City  
ATLANTAState  
GAZip Code  
30342-2362FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723605**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAMBLE, DENNY, E., MR., JR.**

Mailing Address P.O. BOX 52389

City  
SHREVEPORTState  
LAZip Code  
71135-2389FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GUEST CARE MANAGEMENTOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1244.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724566**

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723609**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

591.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5172 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723614**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725287**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GARZARELLI, RAFAEL, J., MR.,**

Mailing Address 4235 SOUTH 500 WEST

City  
MURRAYState  
UTZip Code  
84123-1335FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIC INVESTMENTSOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724992**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.34



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5173 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GENZER, FRANK, , MR., JR.**

Mailing Address 145 SAINT JUDE STREET

City  
BILOXIState  
MSZip Code  
39530-3602FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723799**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GENZER, FRANK, , MR., JR.**

Mailing Address 145 SAINT JUDE STREET

City  
BILOXIState  
MSZip Code  
39530-3602FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724311**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GHEBREMEDHIN, BERHANE, , ,**

Mailing Address 1520 DOVE CY

City  
PASADENAState  
CAZip Code  
91107-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DPSS LA COUNTYOccupation (for Individual)  
ELIGIBILITY SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1270.36

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725344**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5174 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILL, LAWRENCE, , ,**

Mailing Address POB 176

City  
ABILENEState  
TXZip Code  
79604-0176FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MATTHEWS OFCOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724826

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIRVIN, JOANN, , MRS.,**

Mailing Address 7110 CREEKSIDE DR.

City  
LANSINGState  
MIZip Code  
48917-9618FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725750

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723830

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5175 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723838

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723931

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723939

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5176 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724001**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725391**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.70

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725462**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5177 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIUGLIANO, ROBERT, , ,**

Mailing Address 2202 BUCKHOLT STREET

City  
PEARLANDState  
TXZip Code  
77581-6218FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.65

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723501**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLADUE, CRAIG, , ,**

Mailing Address 1061 S SPRUCE AVE

City  
BLOOMINGTONState  
CAZip Code  
92316-1531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.99

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27726254**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLICK, LINDA LOU, , ,**

Mailing Address 2485 SUN MANOR, APT B

City  
PARADISEState  
CAZip Code  
95969-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

273.73

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724331**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5178 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723879**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORE, TRINA, , ,**

Mailing Address 14321 SOUTHWEST 20TH STREET

City  
DAVIEState  
FLZip Code  
33325-5426FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725362**

Amount of Each Receipt this Period

21.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723988**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

23.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5179 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723992**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723994**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724003**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5180 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724007**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAHAM, LOUISE, , ,**

Mailing Address 3786 SOUTH GREY DOVE TERRACE

City  
HOMOSASSAState  
FLZip Code  
34448-7329FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724013**

Amount of Each Receipt this Period

1.77

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRANDSINGER, PEGGY, , ,**

Mailing Address 5501 WEST HILDEBRAND BLVD #208

City  
KENNEWICKState  
WAZip Code  
99338-1975FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725228**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53.77



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5181 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRANZIN, SUE, , ,**

Mailing Address 2804 EMERSON LANE

City  
MIDLANDState  
TXZip Code  
79705-4201FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CHILDCARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723897**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRANZIN, SUE, , ,**

Mailing Address 2804 EMERSON LANE

City  
MIDLANDState  
TXZip Code  
79705-4201FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CHILDCARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724119**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, JOHN, MARKHAM, MR.,**Mailing Address 98 SAN JACINTO BLVD  
APT 2501City  
AUSTINState  
TXZip Code  
78701-4082FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

704.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723511**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

43.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5182 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, JOHN, MARKHAM, MR.,**Mailing Address 98 SAN JACINTO BLVD  
APT 2501City  
AUSTINState  
TXZip Code  
78701-4082FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

704.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723513

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, JOHN, MARKHAM, MR.,**Mailing Address 98 SAN JACINTO BLVD  
APT 2501City  
AUSTINState  
TXZip Code  
78701-4082FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

704.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723655

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, LINCOLN, I., MR., JR.**Mailing Address 1002 ALTAVITA CT  
APT 210City  
LONGMONTState  
COZip Code  
80503-3684FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723590

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

188.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5183 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRITMAN, JOHN, , ,**

Mailing Address 22631 BIG OAK DR

City  
ATHENSState  
ALZip Code  
35613-6069FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725170

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROUND, JIM, , ,**

Mailing Address 9791 E DREYFUS AVE

City  
SCOTTSDALEState  
AZZip Code  
85260-4450FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725415

Amount of Each Receipt this Period

38.01

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROVER, JANICE, , ,**

Mailing Address 173 HIGH STREET

City  
PACHECOState  
CAZip Code  
94553-5505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723631

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

169.45

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5184 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROVER, JANICE, , ,**

Mailing Address 173 HIGH STREET

City  
PACHECOState  
CAZip Code  
94553-5505FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723639**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROVER, JANICE, , ,**

Mailing Address 173 HIGH STREET

City  
PACHECOState  
CAZip Code  
94553-5505FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723645**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAAS, RICHARD, , ,**

Mailing Address 318 BOCA DEL CANON

City  
SAN CLEMENTEState  
CAZip Code  
92672-5402FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

551.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725222**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

103.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5185 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HACKL, MARK, , ,**

Mailing Address 485 HICKORY NUT AVE

City  
OLDSMARState  
FLZip Code  
34677-2016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724370

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HACKL, MARK, , ,**

Mailing Address 485 HICKORY NUT AVE

City  
OLDSMARState  
FLZip Code  
34677-2016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724663

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HACKL, MARK, , ,**

Mailing Address 485 HICKORY NUT AVE

City  
OLDSMARState  
FLZip Code  
34677-2016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

294.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725606

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5186 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERYState  
ALZip Code  
36117-7558FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723459

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERYState  
ALZip Code  
36117-7558FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723460

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERYState  
ALZip Code  
36117-7558FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

854.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723464

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.80

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5187 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAGER, ROY, , ,**

Mailing Address 8653 LILLIAN PLACE

City  
MONTGOMERYState  
ALZip Code  
36117-7558FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723467**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMBY, CAROLYN, T., MS.,**

Mailing Address 685 W KITCHEN DR.

City  
PORT NECHESState  
TXZip Code  
77651-5321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725763**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMLIN, DENNIS, , ,**

Mailing Address 18735 CORSINI DRIVE

City  
SAN ANTONIOState  
TXZip Code  
78258-1629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

624.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724221**

Amount of Each Receipt this Period

21.34

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5188 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMMONS, JOYCE, , ,**

Mailing Address 3525 NEW DELHI DR.

City  
WINSTON SALEMState  
NCZip Code  
27101-6211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724269

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSEN, JUDY, , MRS.,**

Mailing Address P.O.BOX 4213

City  
SHOW LOWState  
AZZip Code  
85902-4213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724291

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HANSEN, JUDY, , MRS.,**

Mailing Address P.O.BOX 4213

City  
SHOW LOWState  
AZZip Code  
85902-4213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724304

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5189 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANSON, BOB, , ,**

Mailing Address 1326 HICKORYCCREEK CT.

City  
WICHITAState  
KSZip Code  
67235-7000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WEIGAND OMEGA MGTOccupation (for Individual)  
PROPERTY MGT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

841.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724186**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSON, BOB, , ,**

Mailing Address 1326 HICKORYCCREEK CT.

City  
WICHITAState  
KSZip Code  
67235-7000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WEIGAND OMEGA MGTOccupation (for Individual)  
PROPERTY MGT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

841.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724440**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARDER, BRUCE, RICHARD, ,**

Mailing Address 1047 PORTUGAL DR

City  
STAFFORDState  
VAZip Code  
22554-2025FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723361**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5190 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARDER, BRUCE, RICHARD, ,**

Mailing Address 1047 PORTUGAL DR

City  
STAFFORDState  
VAZip Code  
22554-2025FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.82

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724312**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARPER, CINDY, , ,**

Mailing Address 4444 HALIFAX DR

City  
PORT ORANGEState  
FLZip Code  
32127-4535FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.52

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725498**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRIS, KAREN, , ,**

Mailing Address 266 PONTA HILLS RD

City  
MERIDIANState  
MSZip Code  
39305-8223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

378.60

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723644**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

147.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5191 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HART, LEEANN, , ,

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723474

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HART, LEEANN, , ,

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723475

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HART, LEEANN, , ,

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723476

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5192 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723477**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723479**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAWKINS, ALLAN, , ,**

Mailing Address 10120 BITTERN DRIVE

City  
PENSACOLAState  
FLZip Code  
32507-7208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.30

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724601**

Amount of Each Receipt this Period

94.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5193 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEATHMAN, CHRISTINE, , ,**

Mailing Address 1119 SOUTH SAGE CREEK COURT

City  
HEBER CITYState  
UTZip Code  
84032-4169FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLYMED PLUSOccupation (for Individual)  
FORMULATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1144.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723786**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEATHMAN, CHRISTINE, , ,**

Mailing Address 1119 SOUTH SAGE CREEK COURT

City  
HEBER CITYState  
UTZip Code  
84032-4169FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLYMED PLUSOccupation (for Individual)  
FORMULATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1144.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724082**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEATH, DARWIN, , ,**

Mailing Address P.O. BOX 16

City  
SOUTH DENNISState  
MAZip Code  
02660-0016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

292.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724578**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5194 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENDERSON, MARGARET, , ,**

Mailing Address 10333 ARVIN HILL RD

City  
AUBREYState  
TXZip Code  
76227-6848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725348**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENDERSON, MARGARET, , ,**

Mailing Address 10333 ARVIN HILL RD

City  
AUBREYState  
TXZip Code  
76227-6848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725351**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENDERSON, MARGARET, , ,**

Mailing Address 10333 ARVIN HILL RD

City  
AUBREYState  
TXZip Code  
76227-6848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

337.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725352**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5195 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENDERSON, MARGARET, , ,**

Mailing Address 10333 ARVIN HILL RD

City  
AUBREYState  
TXZip Code  
76227-6848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725357**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENDERSON, MARGARET, , ,**

Mailing Address 10333 ARVIN HILL RD

City  
AUBREYState  
TXZip Code  
76227-6848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725370**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENDERSON, MARGARET, , ,**

Mailing Address 10333 ARVIN HILL RD

City  
AUBREYState  
TXZip Code  
76227-6848FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

337.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725374**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

79.71

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5196 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENDERSON, RAYMOND, , ,**

Mailing Address 6200 ATTALA ROAD 1106

City  
KOSCIUSKOState  
MSZip Code  
39090-6217FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1058.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724525**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENLEY, DOY, B., MR.,**

Mailing Address 14251 MIMOSA LANE

City  
TUSTINState  
CAZip Code  
92780-2334FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6843.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724452**

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERSHBERGER, SHEILA, , ,**

Mailing Address 537 MELROSE ST.

City  
AKRONState  
OHZip Code  
44305-2813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMMUNITY BAPTIST CHURCHOccupation (for Individual)  
PASTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

730.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725133**

Amount of Each Receipt this Period

90.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1167.46



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5197 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HESS, SUZANNE, , ,**

Mailing Address 5590 N BARRASCA AVE

City  
TUCSONState  
AZZip Code  
85750-6494FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723529

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HIGHTOWER, JOHN, , ,**

Mailing Address 2115 SE 31ST ST

City

OKEECHOBEE

State

FL

Zip Code

34974-6721

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724795

Amount of Each Receipt this Period

38.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City

MOORESTOWN

State

NJ

Zip Code

08057-2931

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723509

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

173.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5198 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723821**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILLMAN, PATRICK, , ,**

Mailing Address 34 HUNTERSTOWN ROAD

City  
GERMANTOWNState  
NYZip Code  
12526-5604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724575**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HITE, SUSAN, , ,**

Mailing Address 3290 POPLAR DR.

City  
LAWRENCEVILLEState  
GAZip Code  
30044-4131FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

439.13

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725316**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5199 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOBSON, MARY, , ,**

Mailing Address 340 PEACHTREE CIR

City  
RINGGOLDState  
GAZip Code  
30736-6743FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

**Transaction ID : SA11A.27724647**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOFF, JOHN, , ,**

Mailing Address 2201 W. SINTO

City  
SPOKANEState  
WAZip Code  
99201-2946FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

**Transaction ID : SA11A.27723376**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOFFMAN, CAROLYN, , ,**

Mailing Address 7619 MARYLAND AVE

City  
SAINT LOUISState  
MOZip Code  
63105-3803FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

906.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

**Transaction ID : SA11A.27724164**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

240.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5200 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOFFMAN, DONALD, R., MR.,**Mailing Address 11921 ROCKVILLE PIKE  
STE. 100City  
ROCKVILLEState  
MDZip Code  
20852-2744FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EXCEL SERVICES CORPORATIONOccupation (for Individual)  
PRESIDENT/CEO - NUCLEAR ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725482**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOKE, TERRY, , ,**

Mailing Address 811 ELIZABETH ROAD

City  
SAN ANTONIOState  
TXZip Code  
78209-6138FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723363**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOWELL, ANITA, , ,**

Mailing Address 208 VISTA CLIFF CIRCLE

City  
CASTLE ROCKState  
COZip Code  
80104-5527FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724693**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

334.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5201 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724530**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUGHES, KATHLEEN, B., MS.,**

Mailing Address 6400 N COUNTY 75 RD

City  
COLUMBIAState  
ALZip Code  
36319-5124FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.45

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723425**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUNT, SUSAN, , ,**

Mailing Address 522 N CANADIAN TER

City  
MUSTANGState  
OKZip Code  
73064-6105FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.08

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723702**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5202 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HURD, RICKEY, , ,**

Mailing Address 40120 COUNTY ROAD 2

City  
WAGNERState  
SDZip Code  
57380-7254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723498**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUTCHINSON, WAYNE, , ,**

Mailing Address 810 POINT O WOODS DR.

City  
TWIN LAKESState  
WIZip Code  
53181-9303FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725891**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725063**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

635.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5203 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IZZO, STEPHEN, K., MR.,**

Mailing Address 2730 SUMMIT DR.

City  
GLENVIEWState  
ILZip Code  
60025-7633FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ZONATHERMOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724596**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACKSON, GEORGE, A., MR.,**

Mailing Address 1630 ELMVIEW DR.

City  
HOUSTONState  
TXZip Code  
77080-7223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725408**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACOBS, JEAN, K., ,**

Mailing Address 1141 STEAMBOAT RUN ROAD

City  
SHEPHERDSTOWNState  
WVZip Code  
25443-4132FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723704**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.88

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5204 OF 6441  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JENNINGS, PAULA, , ,**

Mailing Address 122 QUAIL RUN DR.

City  
WARNER ROBINS

State  
GA

Zip Code  
31088-6504

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.25

Date of Receipt

**02** / **26** / **2025**

**Transaction ID : SA11A.27725124**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JEWETT, STEVEN, , ,**

Mailing Address 31896 BIRCHWOOD DRIVE

City  
LAKE ELSINORE

State  
CA

Zip Code  
92532-2628

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

**02** / **26** / **2025**

**Transaction ID : SA11A.27724561**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEWETT, STEVEN, , ,**

Mailing Address 31896 BIRCHWOOD DRIVE

City  
LAKE ELSINORE

State  
CA

Zip Code  
92532-2628

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

**02** / **26** / **2025**

**Transaction ID : SA11A.27724565**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

81.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5205 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, BRADLEY, R., ,**

Mailing Address 368 HUDSON STREET

City  
PAYNESVILLEState  
MNZip Code  
56362-1235FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KORONIS PARTS, INCOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724288

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, JAMES, D., MR.,**

Mailing Address P.O. BOX 5897

City  
KINGWOODState  
TXZip Code  
77325-5897FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE AGENT & AGENCY OWI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723602

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, KAY, , ,**

Mailing Address 800 NAVAJO AVE

City  
FORT MORGANState  
COZip Code  
80701-4081FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

345.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725065

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5206 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOLLEY, SUE, , MS.,**

Mailing Address 2807 CROSSVINE CIRCLE

City  
THE WOODLANDSState  
TXZip Code  
77380-1396FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724529

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, KARON, , ,**

Mailing Address 1345 165TH ST

City  
FORT SCOTTState  
KSZip Code  
66701-8344FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725220

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725142

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

153.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5207 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725615**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEARNEY, JOYCE, G., MRS.,**

Mailing Address 7 BATTLE RD

City  
HAMPTONState  
VAZip Code  
23666-1403FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725312**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724528**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5208 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724907**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725857**

Amount of Each Receipt this Period

18.22

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725959**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5209 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KELLY, ERNEST, G., MR., JR.**

Mailing Address 219 ANGELUS

City  
MEMPHISState  
TNZip Code  
38112-5201FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

965.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724160**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KELP, VICKI, , ,**

Mailing Address P.O. BOX 758

City  
WHITE DEERState  
TXZip Code  
79097-0758FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724137**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KENNEDY, JENNIFER, , ,**

Mailing Address 3746 CARDINAL BLVD

City  
DAYTONA BEACHState  
FLZip Code  
32118-7204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725570**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

283.20

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5210 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEPNER, LORI, , ,**

Mailing Address PO BOX 3563

City  
GYPSUM

State  
CO

Zip Code  
81637-3022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
COBANK

Occupation (for Individual)  
ENERGY FINANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

**02** / **26** / **2025**

**Transaction ID : SA11A.27724473**

Amount of Each Receipt this Period

950.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KERR, KAT, , ,**

Mailing Address P O BOX 550989

City  
JACKSONVILLE

State  
FL

Zip Code  
32255-0989

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
AUTHOR SPEAKER PROPHET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.75

Date of Receipt

**02** / **26** / **2025**

**Transaction ID : SA11A.27726236**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, JOSEPH, , ,**

Mailing Address 4 FAR HORIZON DR

City  
WALLINGFORD

State  
CT

Zip Code  
06492-2472

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221.96

Date of Receipt

**02** / **26** / **2025**

**Transaction ID : SA11A.27724103**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1077.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5211 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNOLLENBERG, ROBERT, , ,**

Mailing Address 280 CANON VIEW RD

City  
BOULDERState  
COZip Code  
80302-9429FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724532**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNOWLES, KAREN, , ,**

Mailing Address 308 GRAVES DRIVE

City  
FORESTState  
VAZip Code  
24551-2622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CENTRA HEALTHOccupation (for Individual)  
SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

794.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724017**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNOWLES, KAREN, , ,**

Mailing Address 308 GRAVES DRIVE

City  
FORESTState  
VAZip Code  
24551-2622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CENTRA HEALTHOccupation (for Individual)  
SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

794.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724915**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5212 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNOWLES, MARSHALL, F., MR.,**

Mailing Address 588 MOUNT CARMEL RD

City  
CULLODENState  
GAZip Code  
31016-6134FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CARPENTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724350**

Amount of Each Receipt this Period

160.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNUITSEN, SHIRLEY, , ,**

Mailing Address 1149 STANTON SHADOW LN

City  
APOPKAState  
FLZip Code  
32712-5493FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725495**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOCH, RICK, E., MR.,**

Mailing Address 1900 W NICKERSON ST

City  
SEATTLEState  
WAZip Code  
98119-1661FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ALL CITY FENCE CO.Occupation (for Individual)  
OWNER-PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725423**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

446.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5213 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOELTL, RICHARD, , ,**

Mailing Address 5335 LIGURIAN DR.

City  
SAN JOSEState  
CAZip Code  
95138-2324FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725914**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KORMYLO, KENT, , MR.,**

Mailing Address 4751 E 3900 N

City  
EDENState  
UTZip Code  
84310-1719FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.10

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723429**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUDLA, JEFF, , MR.,**

Mailing Address 4024 CALLE LISA

City  
SAN CLEMENTEState  
CAZip Code  
92672-4509FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725441**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

256.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5214 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUHN, ROBERT, , ,**

Mailing Address 3718 LANGTRY DR

City  
AMARILLOState  
TXZip Code  
79109-3926FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.20

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724315**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUHN, ROBERT, , ,**

Mailing Address 3718 LANGTRY DR

City  
AMARILLOState  
TXZip Code  
79109-3926FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.20

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724514**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.91

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27726303**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5215 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LALONDE, RICHARD , , ,**

Mailing Address 3332 NW 47TH CT

City  
OCALAState  
FLZip Code  
34482-8322FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

938.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723957**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAM, BEN, MINH, MR.,**

Mailing Address 3002 ALBANY CT

City  
WOODBIDGEState  
VAZip Code  
22193-1208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725650**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANCASTER, WILLIAM, , ,**

Mailing Address 5991 EAST PRINCETON AVENUE

City  
CHERRY HILLS VILLAState  
COZip Code  
80111-1030FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GMT EXPLORATIONOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725845**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.04

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5216 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LANDESMAN, MARIA, A., MRS.,

Mailing Address 920 PARK AVE. APT. 10A

City  
NEW YORKState  
NYZip Code  
10028-0369FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723741

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANDESMAN, MARIA, A., MRS.,

Mailing Address 920 PARK AVE. APT. 10A

City  
NEW YORKState  
NYZip Code  
10028-0369FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723831

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANDESMAN, MARIA, A., MRS.,

Mailing Address 920 PARK AVE. APT. 10A

City  
NEW YORKState  
NYZip Code  
10028-0369FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723837

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5217 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANDESMAN, MARIA, A., MRS.,**

Mailing Address 920 PARK AVE. APT. 10A

City  
NEW YORKState  
NYZip Code  
10028-0369FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723843**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANE, DAVINA, , ,**

Mailing Address 11323 PACIFIC ST.

City  
COLUMBIAState  
CAZip Code  
95310-9603FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725753**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LARIMER, ROBERT, S., ,**

Mailing Address 6110 BAYOU CROSSING DRIVE

City  
ALEXANDRIAState  
LAZip Code  
71303-7002FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SOUND PHYSICIANOccupation (for Individual)  
HOSPITALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

403.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725641**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5218 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAUMANN, EDWARD, O., ,**

Mailing Address 27 2ND ST

City  
COLORADO SPRINGSState  
COZip Code  
80906-3181FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724235**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAYO, LEWIS, DANIEL, MR., SR.**

Mailing Address 2316 W VINE ST

City  
LODIState  
CAZip Code  
95242-3727FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
H&R BLOCK TAX GROUPOccupation (for Individual)  
ENROLLED AGENT/TAX PREPARATI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723628**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAYO, LEWIS, DANIEL, MR., SR.**

Mailing Address 2316 W VINE ST

City  
LODIState  
CAZip Code  
95242-3727FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
H&R BLOCK TAX GROUPOccupation (for Individual)  
ENROLLED AGENT/TAX PREPARATIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724614**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5219 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LE SESNE, CAROL, , ,**

Mailing Address 1096 EVERGREEN TRAIL

City  
HALIFAXState  
VAZip Code  
24558-3300FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723412

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725550

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

696.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725552

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

139.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5220 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725554**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725556**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

696.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725559**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.69



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5221 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEACH, JOHN, H., MR.,**

Mailing Address 2654 OLD LAIR RD

City  
CYNTHIANAState  
KYZip Code  
41031-4632FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725572**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724856**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724876**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.55

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5222 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANS

State  
NY

Zip Code  
11412-2017

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

**Transaction ID : SA11A.27724886**

Amount of Each Receipt this Period

28.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANS

State  
NY

Zip Code  
11412-2017

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

**Transaction ID : SA11A.27724893**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEVIS, RICHARD, E., MR.,**

Mailing Address 5225 OLD RIVER ROAD

City  
BAKER

State  
FL

Zip Code  
32531-9302

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

**Transaction ID : SA11A.27723630**

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

80.17

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5223 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWIS, ED, , ,**

Mailing Address 19585 NORTH 101ST STREET

City  
SCOTTSDALEState  
AZZip Code  
85255-3786FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.53

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725779**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEWIS, STEPHEN, , ,**

Mailing Address 5015 PROCTOR AVE

City  
OAKLANDState  
CAZip Code  
94618-2546FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723437**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINDSEY, JOHN, , MR.,**

Mailing Address 12416 WILLOW HILL DR.

City  
MOORPARKState  
CAZip Code  
93021-2764FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LINDSEY & LINDSEYOccupation (for Individual)  
FINANCIAL ADVISOR/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.87

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723809**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

271.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5224 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LITZAU, JEROME, , ,**

Mailing Address 300 E N SHORE DR. APT 14

City  
HARTLANDState  
WIZip Code  
53029-FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724283**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOGSDON, NORMAN , , ,**

Mailing Address 5940 HAVENS TRL

City  
TYLERState  
TXZip Code  
75707-6402FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

TIDEWATER MARINE

Occupation (for Individual)

MARINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724218**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LORING, ARTHUR, , ,**Mailing Address 1100 S FLAGLER DR  
UNIT 1201City  
WEST PALM BEACHState  
FLZip Code  
33401-6539FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724563**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5225 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOWRY, RANDY, K., MR.,**

Mailing Address 15914 RATHLIN CT

City  
SPRINGState  
TXZip Code  
77379-6887FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UNION GASOccupation (for Individual)  
OIL AND GAS SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.09

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724803**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUBIT, FREDRIC, , ,**

Mailing Address 28 GRAVEL HILL RD

City  
KINNELONState  
NJZip Code  
07405-2245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NJEOccupation (for Individual)  
HEALTHCARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.29

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724080**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724714**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

128.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5226 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724719**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27726154**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUQUIRE, JOSEPH, , ,**

Mailing Address 3440 S JEFFERSON STREET APT 1109

City  
FALLS CHURCHState  
VAZip Code  
22041-3130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725031**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5227 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUTTENBERGER, RUDY, , ,**

Mailing Address 17426 N 2ND PL

City  
PHOENIXState  
AZZip Code  
85022-1805FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

793.30

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723685**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACKAIG, RICHARD, A., MR.,**Mailing Address 25422 SEA BLUFFS DR  
UNIT 208City  
DANA POINTState  
CAZip Code  
92629-2194FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.64

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725412**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAGUIRE, JOANNE, , MS.,**

Mailing Address 144 E 84TH ST

City  
NEW YORKState  
NYZip Code  
10028-2004FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723728**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5228 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MALCOM, JEFFREY, , ,**

Mailing Address 2300 LIBERTY HILL CHURCH RD

City  
MONROEState  
GAZip Code  
30655-5829FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726001**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MALUKAS, DAIVA, , ,**

Mailing Address 8130 LAKE RIDGE DR.

City  
BURR RIDGEState  
ILZip Code  
60527-5975FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HMDOccupation (for Individual)  
V.P

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724181**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANSOUR, ALFRED, A., DR.,**

Mailing Address 3771 BELLAIRE BLVD

City  
HOUSTONState  
TXZip Code  
77025-1206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ACCESS RADIOLOGYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

847.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724549**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

459.25



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5229 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANTHEI, LEAH, , MS.,**

Mailing Address 46646 COUNTY ROAD 613

City  
NASHWAUKState  
MNZip Code  
55769-4515FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723606**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, CHRISTOPHER, , MR.,**

Mailing Address 2794 CARLARIS RD

City  
SAN MARINOState  
CAZip Code  
91108-1715FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AC MARTINOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725058**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, LARRY, J., MR.,**

Mailing Address 2102 FOREST MOUNTAIN RD

City  
PRESCOTTState  
AZZip Code  
86303-6910FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LARRY J. MARTIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723707**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.42

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5230 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724558**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725254**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASTRO, MABEL, , ,**

Mailing Address 4616 PRAIRIE POINT BOULEVARD

City  
KISSIMMEEState  
FLZip Code  
34746-6364FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

889.10

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724445**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5231 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCDANIEL, RON, , MR.,**

Mailing Address 509 HARDWOOD CIR

City  
ORLANDOState  
FLZip Code  
32828-8290FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.08

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724812**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCKAY, HEIDI, , ,**

Mailing Address 1595 CO RD 1439

City  
SULPHUR SPRINGSState  
TXZip Code  
75482-8749FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.93

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724074**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCLAUGHLIN, HELEN, , ,**

Mailing Address 2300 CHANDLERS LANE UNIT 108

City  
OLMSTED FALLSState  
OHZip Code  
44138-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.70

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725537**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5232 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCLAUGHLIN, HELEN, , ,**

Mailing Address 2300 CHANDLERS LANE UNIT 108

City  
OLMSTED FALLSState  
OHZip Code  
44138-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725877**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNAMARA, PATRICK, , ,**

Mailing Address 4750 W PASEO DE LAS COLINAS

City  
TUCSONState  
AZZip Code  
85745-9240FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TRETSCHOK MCNAMARA & MILLEROccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724433**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEADEN, THOMAS, , ,**

Mailing Address 24 ENGINE CREEK CT

City  
DURANGOState  
COZip Code  
81301-8593FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

397.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725652**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5233 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MESSERSMITH, CHARLES, , ,**

Mailing Address 604 HATCHWOOD DR.

City  
HAINES CITYState  
FLZip Code  
33844-8208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JEHOVAHOccupation (for Individual)  
PREACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.18

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27724397

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEYER, MARK, J., MR.,**

Mailing Address 2002 COLINA CT

City  
ATLANTIC BEACHState  
FLZip Code  
32233-4530FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BKFS, INC.Occupation (for Individual)  
APPLICATION DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.13

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27726046

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILES, DIANNE, E., MRS.,**

Mailing Address 2661 TALLANT RD, C898

City  
SANTA BARBARAState  
CAZip Code  
93105-4839FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

708.28

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27724336

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5234 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, CLIFFORD, , ,**

Mailing Address 332 BERRYSBURG RD

City  
MILLERSBURGState  
PAZip Code  
17061-1401FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723421**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, COLLEEN, , ,**

Mailing Address 5400 LIKINI ST, APT. 303

City  
HONOLULUState  
HIZip Code  
96818-1731FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HAWAIIAN ELECTRICOccupation (for Individual)  
RATE ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724848**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, PATRICIA, , ,**

Mailing Address 9843 QUAIL COVE COURT

City  
WINDERMEREState  
FLZip Code  
34786-8012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
QUEST DIAGNOSTICSOccupation (for Individual)  
EHS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726047**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5235 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLS, DANIEL, , ,**

Mailing Address 369 SOUTH LAKE DRIVE

City  
PALM BEACHState  
FLZip Code  
33480-4571FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5505.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724699

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLS, KENNETH, B., ,**

Mailing Address 110 SAINTSBURY PL

City  
LEXINGTONState  
NCZip Code  
27295-2085FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

836.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724864

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MINARDI, LAWRENCE, M., DR.,**Mailing Address 4608 VIRGINIA AVE SE  
STE. 1City  
CHARLESTONState  
WVZip Code  
25304-1854FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MINARDI EYE CTR INCOccupation (for Individual)  
OPHTHELMOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724540

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

520.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5236 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIRSKY, CYNTHIA, A., MS.,**

Mailing Address 25331 DERBYHILL DRIVE

City  
LAGUNA HILLSState  
CAZip Code  
92653-7836FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PACIFIC RIM CAPITAL INC.Occupation (for Individual)  
DIRECTOR SPECIAL PROJECTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.25

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725012**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOFFETT, MARY, , ,**

Mailing Address 2170 HEMPILL DRIVE

City  
JENAState  
LAZip Code  
71342-4242FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.33

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723368**

Amount of Each Receipt this Period

9.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOFFETT, MARY, , ,**

Mailing Address 2170 HEMPILL DRIVE

City  
JENAState  
LAZip Code  
71342-4242FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.33

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725585**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

305.93



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5237 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOLENDORP, DAYTON, , MR.,**

Mailing Address 6507 CASTLE KNOLL COURT

City  
INDIANAPOLISState  
INZip Code  
46250-1439FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725995**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726041**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTGOMERY, ROBBIE, , ,**

Mailing Address 655 DOVER RD

City  
BENTONIAState  
MSZip Code  
39040-9024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724366**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5238 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOORE, ARNOLD, L., MR.,**

Mailing Address 127 W COUNTRY GABLES DR

City  
PHOENIXState  
AZZip Code  
85023-5251FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723662**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORRICAL, PATRICIA, K., ,**

Mailing Address 5682 COUNTRY LAKES DR

City  
SARASOTAState  
FLZip Code  
34243-3811FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724179**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRICAL, PATRICIA, K., ,**

Mailing Address 5682 COUNTRY LAKES DR

City  
SARASOTAState  
FLZip Code  
34243-3811FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

348.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725951**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5239 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORRIS, TIMOTHY, , ,**

Mailing Address 7415 FORREST DAWN WAY

City  
HOUSTONState  
TXZip Code  
77095-4112FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GOBOccupation (for Individual)  
BANKING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724587**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MUELLER, VALERIE, , ,**

Mailing Address PO BOX 2863

City  
GULFPORTState  
MSZip Code  
39505-2863FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RPMPIZZAOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725941**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, LINDA, L., MS.,**

Mailing Address 310 HOMEWOOD AVE

City  
DEBARYState  
FLZip Code  
32713-2112FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

525.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724192**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

257.13

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5240 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUSE, TAMMIE, , ,**

Mailing Address 7420 COUNTS MASSIE RD

City  
MAUMELLE

State  
AR

Zip Code  
72113-6652

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.88

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27725486**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NAMORATO, MICHAEL, , ,**

Mailing Address 129 LAKEWAY DR.

City  
OXFORD

State  
MS

Zip Code  
38655-9600

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.35

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27724770**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NAMORATO, MICHAEL, , ,**

Mailing Address 129 LAKEWAY DR.

City  
OXFORD

State  
MS

Zip Code  
38655-9600

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.35

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27724779**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

42.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5241 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NAMORATO, MICHAEL, , ,**

Mailing Address 129 LAKEWAY DR.

City  
OXFORDState  
MSZip Code  
38655-9600FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724792**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEAL, LONNIE, DAVID, ,**

Mailing Address 7128 NORTH 63DRIVE

City  
GLENDALEState  
AZZip Code  
85301-2385FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723620**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEEDLE, JACQUELINE, , MRS.,**Mailing Address 3747 PEACHTREE RD NE  
APT 519City  
ATLANTAState  
GAZip Code  
30319-1329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

548.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723370**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5242 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSEN, PATRICIA, , ,**

Mailing Address 10026 LLEWELLYN COURT

City  
FAIRFAXState  
VAZip Code  
22032-2713FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DODOccupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725088**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, JUDY, , ,**

Mailing Address 2704 WOODRIDGE ROAD

City  
MOUNTAIN BRKState  
ALZip Code  
35223-2912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725169**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, JUDY, , ,**

Mailing Address 2704 WOODRIDGE ROAD

City  
MOUNTAIN BRKState  
ALZip Code  
35223-2912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725208**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

248.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5243 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, KAREN, , ,**

Mailing Address 4304 COCHRAN CHAPEL CIRCLE

City  
DALLASState  
TXZip Code  
75209-2026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725847

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEWELL, LINDA, , ,**

Mailing Address 4324 SUMMER STAR LANE

City  
FORT WORTHState  
TXZip Code  
76244-4934FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724368

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEWHOUSE, BRENDA, , ,**

Mailing Address 665 S PEAR ORCHARD RD

City  
RIDGELANDState  
MSZip Code  
39157-4861FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

317.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724261

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5244 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEWHOUSE, BRENDA, , ,**

Mailing Address 665 S PEAR ORCHARD RD

City  
RIDGELANDState  
MSZip Code  
39157-4861FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724706

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEWMAN, BETTY, , ,**

Mailing Address 22800 RIVIERA DRIVE

City  
ATHENSState  
ALZip Code  
35613-8124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724175

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEWTON, EVELYN, , ,**

Mailing Address 954 SPIRES ROAD

City  
EL DORADOState  
KSZip Code  
67042-8622FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

283.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723768

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

157.26



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5245 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NIEMANN, JULI, , ,**

Mailing Address 3101 CHRISTINE STREET NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-4823FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USFWSOccupation (for Individual)  
LANDSCAPE ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725365

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIEMANN, NANCY, , ,**

Mailing Address 18 DOGWOOD RD.

City  
MORRIS PLAINSState  
NJZip Code  
07950-1919FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

853.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724872

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NIEMANN, NANCY, , ,**

Mailing Address 18 DOGWOOD RD.

City  
MORRIS PLAINSState  
NJZip Code  
07950-1919FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

853.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724875

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5246 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOLLER, KENNETH, , ,**

Mailing Address 5752 BLACKBIRD LANE

City  
LA VERNEState  
CAZip Code  
91750-2370FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724296

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NUDI, PETER, , ,**

Mailing Address 1072 LILLY VUE CT

City  
MARSState  
PAZip Code  
16046-3054FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725620

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ODOM, HELEN, , ,**

Mailing Address 1723 DONNA LYNN DR SE

City  
SMYRNAState  
GAZip Code  
30080-2411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723415

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5247 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ODOM, TAMELA, , ,**

Mailing Address 403 SANFORD ROAD

City  
ANDALUSIAState  
ALZip Code  
36420-4121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724940

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, BEVERLY, , MRS.,**

Mailing Address 200 IDLE HOUR DR

City  
MACONState  
GAZip Code  
31210-4702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
1842 INNOccupation (for Individual)  
BED AND BREAKFAST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725744

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLSON, BEVERLY, , MRS.,**

Mailing Address 200 IDLE HOUR DR

City  
MACONState  
GAZip Code  
31210-4702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
1842 INNOccupation (for Individual)  
BED AND BREAKFAST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725749

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5248 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLSON, PATRICIA, , ,**

Mailing Address 243 OCEANO DRIVE

City  
LOS ANGELESState  
CAZip Code  
90049-4123FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.61

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723990**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OPDYCKE, NICOLA, , ,**

Mailing Address 2202 MIRAMONTE WAY

City  
NAPLESState  
FLZip Code  
34105-3074FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724486**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724511**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5249 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725745

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PALERMINO, RONALD, , ,**

Mailing Address 64 COUNTY LINE ROAD

City  
AMITYVILLEState  
NYZip Code  
11701-3121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723510

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PALERMINO, RONALD, , ,**

Mailing Address 64 COUNTY LINE ROAD

City  
AMITYVILLEState  
NYZip Code  
11701-3121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724195

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

171.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5250 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALMER, JEAN, B., MRS.,**

Mailing Address 224 ARNOLD AVE

City  
SYRACUSEState  
NYZip Code  
13210-3714FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726080**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PANDOLFO, MICHAEL, , MR.,**

Mailing Address 7900 SUTHERLAND FARM RD

City  
PROSPECTState  
KYZip Code  
40059-9269FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724906**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARIS, MARYELLEN, , ,**

Mailing Address 1816 N CHURCH ST

City  
ROCKFORDState  
ILZip Code  
61103-4621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726232**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.84

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5251 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARIS, MARYELLEN, , ,**

Mailing Address 1816 N CHURCH ST

City  
ROCKFORDState  
ILZip Code  
61103-4621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.75

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27726233**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARIS, MARYELLEN, , ,**

Mailing Address 1816 N CHURCH ST

City  
ROCKFORDState  
ILZip Code  
61103-4621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.75

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27726234**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARIS, MARYELLEN, , ,**

Mailing Address 1816 N CHURCH ST

City  
ROCKFORDState  
ILZip Code  
61103-4621FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.75

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27726235**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5252 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.76

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724455**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAYNE, EDWIN, , ,**

Mailing Address 2061 SE ACADEMY ST

City  
DALLASState  
ORZip Code  
97338-1965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.11

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724162**

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYNE, EDWIN, , ,**

Mailing Address 2061 SE ACADEMY ST

City  
DALLASState  
ORZip Code  
97338-1965FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.11

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724163**

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.97



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5253 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, EDWIN, , ,**

Mailing Address 2061 SE ACADEMY ST

City  
DALLASState  
ORZip Code  
97338-1965FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724169

Amount of Each Receipt this Period

13.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PEARSON, FRANCES, TAYLOR, MRS.,**

Mailing Address 1940 MAYFLOWER DR.

City  
DALLASState  
TXZip Code  
75208-3113FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MUSIC TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725511

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PELTIER, ANNA, K., ,**

Mailing Address 449 DALTON ROAD

City  
DALTONState  
NHZip Code  
03598-5709FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723379

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.10

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5254 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PELTIER, ANNA, K., ,**

Mailing Address 449 DALTON ROAD

City  
DALTON

State  
NH

Zip Code  
03598-5709

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27726247**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRY, NELL, , ,**

Mailing Address 1705 PALMETTO CV

City  
DERIDDER

State  
LA

Zip Code  
70634-5382

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.14

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27724273**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORG

State  
VA

Zip Code  
23860-8229

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

388.35

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27725725**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

98.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5255 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORGState  
VAZip Code  
23860-8229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725818**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725566**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725443**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5256 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PHILLIPS, KAREN, , ,**

Mailing Address 13888 STATE ROAD 32 EAST

City  
NOBLESVILLEState  
INZip Code  
46060-8858FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724010**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723400**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMSState  
MNZip Code  
56686-4509FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723483**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5257 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIEPER, KATHRYN, , ,**

Mailing Address 4172 66TH AVE NW

City  
WILLIAMS

State  
MN

Zip Code  
56686-4509

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.38

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27724197**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIETTE, LYSSA, , ,**

Mailing Address 118 EAST ERIE STREET 23A

City  
CHICAGO

State  
IL

Zip Code  
60611-5151

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.75

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27725372**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PLACA, ALAN, , ,**

Mailing Address 200 EAGLETON ESTATE BLVD

City  
PALM BEACH GARDENS

State  
FL

Zip Code  
33418-8411

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GIULIANI PARTNERS LLC

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

567.94

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27725698**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

80.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5258 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POHL, MATTHEW, J., MR.,**

Mailing Address 5146 GLEN VERDE DR

City  
BONITAState  
CAZip Code  
91902-2626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725757

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POHLE, CORTLAND, , ,**

Mailing Address 614 TATTLESBURY DR

City  
CONWAYState  
SCZip Code  
29526-2652FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724691

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POTEET, MARY, , ,**

Mailing Address 3636 GREENACRES PLACE DR.

APT 43

City  
BOSSIER CITYState  
LAZip Code  
71111-2147FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

402.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723767

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

181.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5259 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRESCOTT, JACKIE, , MRS.,**

Mailing Address 5979 GARFIELD ST

City  
CHINOState  
CAZip Code  
91710-2723FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723802**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRESTON, BRADLEY, B., MR.,**

Mailing Address 2109 SOMMER ST

City  
NAPAState  
CAZip Code  
94559-4306FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726273**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PYLE, DON, , ,**

Mailing Address 4 BLAISDELL ST

City  
AUGUSTAState  
MEZip Code  
04330-6902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

431.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726104**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

534.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5260 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RADY, PAUL, M., MR.,**

Mailing Address 4 MOCKINGBIRD LN

City  
ENGLEWOODState  
COZip Code  
80113-4813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ANTERO RESOURCESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8901.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724072**

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REED, MICHAEL, , ,**

Mailing Address 3040 SANCTUARY CIR

City  
LAKELANDState  
FLZip Code  
33803-5484FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CENTRAL GARDEN & PET CO.Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725062**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REESE, THOMAS, , ,**

Mailing Address 23976 STAGECOACH ROAD

City  
GENESEOState  
ILZip Code  
61254-8361FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

279.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723653**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

661.05



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5261 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REEVES, BOB, R., MR.,**

Mailing Address 4500 S ROLLING HILLS RD

City  
COLUMBIAState  
MOZip Code  
65201-8828FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

954.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723882**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REILLY, TOM, E., MR., JR.**

Mailing Address 8877 PICKWICK DRIVE

City  
INDIANAPOLISState  
INZip Code  
46260-1709FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724086**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REINHARD, ROSEMARIE, , MR.,**

Mailing Address 2755 FALCON STREET

City  
EAST MEADOWState  
NYZip Code  
11554-4318FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725717**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

128.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5262 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REISS, CLAIRE, K., MRS.,**Mailing Address **464 PROSPECT STREET**  
**UNIT 501**City  
**LA JOLLA**State  
**CA**Zip Code  
**92037-4742**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1431.74**

Date of Receipt

**02 / 26 / 2025****Transaction ID : SA11A.27726218**

Amount of Each Receipt this Period

**20.82**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REIZOVIC, ROY, , ,**Mailing Address **8520 SUTTERFIELD DRIVE**City  
**COLORADO SPRINGS**State  
**CO**Zip Code  
**80920-6204**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**227.87**

Date of Receipt

**02 / 26 / 2025****Transaction ID : SA11A.27725417**

Amount of Each Receipt this Period

**1.04**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RESSLER, HAROLD, , MR.,**Mailing Address **5383 E RURAL RIDGE CIR**City  
**ANAHEIM**State  
**CA**Zip Code  
**92807-4632**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**347.10**

Date of Receipt

**02 / 26 / 2025****Transaction ID : SA11A.27723428**

Amount of Each Receipt this Period

**36.44**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►**58.30**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5263 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RHODES, ZOFIA, , ,**

Mailing Address P O BOX 2423

City  
BRYSON CITYState  
NCZip Code  
28713-2423FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725792

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724429

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724444

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5264 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724492**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724498**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724526**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5265 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726061**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723889**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723895**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5266 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724127

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBBINS, RAY, L., MRS.,**

Mailing Address 114 SHADY VALLEY DR.

City  
CHESTERFIELDState  
MOZip Code  
63017-2626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726269

Amount of Each Receipt this Period

7.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBBINS, RAY, L., MRS.,**

Mailing Address 114 SHADY VALLEY DR.

City  
CHESTERFIELDState  
MOZip Code  
63017-2626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726270

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

16.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5267 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBERTSMATSUO, MARY, , ,**

Mailing Address 903 WAIHOLO STREET

City  
HONOLULUState  
HIZip Code  
96821-1225FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724036

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBERTSON, ZANNA, , ,**

Mailing Address 1159 MOUNTAIN RD

City  
KEMPTONState  
PAZip Code  
19529-9370FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KEMPTON NEW CHURCHOccupation (for Individual)  
TEACHERS AIDE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724945

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, DALE, , ,**

Mailing Address 104 BRANNON LANE

City  
TROYState  
ALZip Code  
36079-8203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723438

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5268 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, DALE, , ,**

Mailing Address 104 BRANNON LANE

City  
TROYState  
ALZip Code  
36079-8203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723494

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, DALE, , ,**

Mailing Address 104 BRANNON LANE

City  
TROYState  
ALZip Code  
36079-8203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725244

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, FRANK, , ,**

Mailing Address 4240 MAE AVE

City  
LOUISVILLEState  
KYZip Code  
40216-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724520

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.98



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5269 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, JEFF, , ,**

Mailing Address 3416 PRAIRIE GRASS ROAD

City  
OKLAHOMA CITYState  
OKZip Code  
73120-5607FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723640

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, JEFF, , ,**

Mailing Address 3416 PRAIRIE GRASS ROAD

City  
OKLAHOMA CITYState  
OKZip Code  
73120-5607FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723648

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723596

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

109.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5270 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723731

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724077

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725132

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

115.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5271 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725135

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725136

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725174

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5272 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODACK, MARK, , ,**Mailing Address 16051 COLLINS AVE  
3502City  
NORTH MIAMI BEACHState  
FLZip Code  
33160-4624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

782.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723924

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODACK, MARK, , ,**Mailing Address 16051 COLLINS AVE  
3502City  
NORTH MIAMI BEACHState  
FLZip Code  
33160-4624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

782.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724027

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODACK, MARK, , ,**Mailing Address 16051 COLLINS AVE  
3502City  
NORTH MIAMI BEACHState  
FLZip Code  
33160-4624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

782.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724831

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

171.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5273 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODACK, MARK, , ,**Mailing Address 16051 COLLINS AVE  
3502City  
NORTH MIAMI BEACHState  
FLZip Code  
33160-4624FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

782.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725578**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROONEY, RANDALL, , ,**

Mailing Address 101 ONEILL CT

City  
FOLSOMState  
CAZip Code  
95630-2379FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724999**

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROSADO, ROBERT, , ,**

Mailing Address 2108 MARLBORO DRIVE

City  
ALEXANDRIAState  
VAZip Code  
22304-1014FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IDFAOccupation (for Individual)  
SENIOR DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724434**

Amount of Each Receipt this Period

210.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

285.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5274 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUFFINO, SANDRA, , ,**

Mailing Address 6505 CYPRESS DRIVE

City  
OMAHAState  
NEZip Code  
68137-4273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723841

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724111

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724212

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5275 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RYBERG, JANICE, , MS.,**

Mailing Address 480 E CLARK AVE

City  
SANTA MARIAState  
CAZip Code  
93455-4835FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.38

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27723691

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SACCANY, RICHARD, , ,**Mailing Address 7600 EAST CALEY AVENUE  
APT 914City  
ENGLEWOODState  
COZip Code  
80111-6778FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STANTEL CONSULTINGOccupation (for Individual)  
MINING ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27725587

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SADAR, AMELIA, , MS.,**

Mailing Address 1604STONE MANSION DR.

City  
SEWICKLEYState  
PAZip Code  
15143-8601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.91

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27725363

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

74.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5276 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723473**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723487**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723493**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.64



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5277 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723499**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, LOUISE, R., MS.,**

Mailing Address 2037 COUNTY ROAD 2287

City  
GLENWOODState  
ALZip Code  
36034-3204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.39

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723502**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANDERS, MELVIN, , ,**

Mailing Address 4039 MAYFLOWER CT SW

City  
LILBURNState  
GAZip Code  
30047-3206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.60

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724155**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5278 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCARLETT, KENNETH, , ,**

Mailing Address 17114 PARK LODGE DR.

City  
SPRINGState  
TXZip Code  
77379-4493FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726294**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHAFFER, JOHN, , ,**

Mailing Address W161N5891 CHERYLN DR.

City  
MENOMONEE FALLSState  
WIZip Code  
53051-5645FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725681**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHATTYN, JOHN, , MR.,**

Mailing Address 129 CROCKETT DR.

City  
KERRVILLEState  
TXZip Code  
78028-8114FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1214.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723615**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5279 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHERZER, DOC, , ,**

Mailing Address 24921 MUIRLANDS BLVD SPC 301

City  
LAKE FORESTState  
CAZip Code  
92630-4826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725505**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHIPPER, GERRIT, , ,**

Mailing Address 2344 DIXON RD

City  
FREDERICKState  
MDZip Code  
21704-8131FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CWCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725841**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLAGETER, FRANK, , MR.,**

Mailing Address 4420 N.E. 28TH AVENUE

City  
POMPANO BEACHState  
FLZip Code  
33064-7222FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724546**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5280 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725106**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725626**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLOUGH, JAMES, , ,**

Mailing Address 3810 CHURCH HILL

City  
CRYSTAL LAKEState  
ILZip Code  
60014-6511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

597.20

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725663**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5281 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLOUGH, JAMES, , ,**

Mailing Address 3810 CHURCH HILL

City  
CRYSTAL LAKEState  
ILZip Code  
60014-6511FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725702**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHNAIDT, LORAN, , ,**

Mailing Address 10744 FOREST PATH DRIVE

City  
SAINT LOUISState  
MOZip Code  
63128-2009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724815**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHNEIDER, RUSSELL, , ,**

Mailing Address 2918 RIVERSIDE TR

City  
TEMPLEState  
TXZip Code  
76502-5914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BELL COUNTYOccupation (for Individual)  
COMMISSIONER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726026**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5282 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHRAM, CHARLES, , ,**

Mailing Address 14816 WEST HURON DRIVE

City  
SUN CITY WESTState  
AZZip Code  
85375-5988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.52

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725051**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHROCK, WILLIAM, , MR.,**

Mailing Address 1353 HWY 93 N

City  
VICTORState  
MTZip Code  
59875-9769FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SCHROCK CONSTRUCTION INCOccupation (for Individual)  
BUILDING CONSTRUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723900**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHUCKER, JEFFREY, D., MR.,**

Mailing Address 451 MOUNTAIN RD

City  
KEMPTONState  
PAZip Code  
19529-9336FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BAILEY WOOD PRODUCTSOccupation (for Individual)  
GEN. MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725434**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

202.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5283 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHWAB, PAUL, , ,**

Mailing Address 5001 230TH ST

City  
RANDALLState  
MNZip Code  
56475-2326FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

PKP LLC

Occupation (for Individual)

CO-OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723734**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724055**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724057**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5284 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27724065

Amount of Each Receipt this Period

474.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27724069

Amount of Each Receipt this Period

474.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27724079

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

40.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5285 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCOTT, AUDREY, , ,

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724093

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCOTT, AUDREY, , ,

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724101

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCOTT, AUDREY, , ,

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724108

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5286 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, AUDREY, , ,**

Mailing Address 9778 SW COQUILLE CT

City  
TUALATINState  
ORZip Code  
97062-9528FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724118**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SELZER, INGRID, , ,**

Mailing Address 2614 MEADOW LANE

City  
LA MARQUEState  
TXZip Code  
77568-5044FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724064**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEPHTON, GAYLE, , ,**

Mailing Address 150E LAKESHORE DR. #72

City  
LAKE ELSINOREState  
CAZip Code  
92530-4241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724282**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5287 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SERRATO, MARCELLO, W., MR.,**

Mailing Address 4250 SAINT CHARLES WAY

City  
BOCA RATONState  
FLZip Code  
33434-5359FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PRESTIGE AUTOOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724749**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHELDON, JAMES, , MR.,**

Mailing Address P.O. BOX 179

City  
SCOTTSVILLEState  
KYZip Code  
42164-0179FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
GOSPEL MUSIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725140**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723978**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

229.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5288 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725607

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725635

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725639

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

97.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5289 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726068

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726069

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHUGER, JILL, , ,**

Mailing Address N7756 BUSHEY RD

City  
TREGOState  
WIZip Code  
54888-9327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725214

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5290 OF 6441

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, BETTY, , ,**

Mailing Address 4438 WHEELER ST

City  
GRAND PRAIRIEState  
TXZip Code  
75052-3348FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724204**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, BETTY, , ,**

Mailing Address 4438 WHEELER ST

City  
GRAND PRAIRIEState  
TXZip Code  
75052-3348FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724209**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, HELEN, , ,**

Mailing Address 4856 NORTHWEST FRANCIS DRIVE

City  
SILVERDALEState  
WAZip Code  
98383-9239FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724668**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

206.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5291 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, MARY, L., ,**

Mailing Address 2939 QUENLEY ST

City  
SAINT CHARLESState  
MOZip Code  
63301-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724140

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOBOLAK, EDWARD, S., MR.,**

Mailing Address 217 THE HILLS DR.

City  
AUSTINState  
TXZip Code  
78738-1338FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725430

Amount of Each Receipt this Period

45.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLEANICOV, PAVEL, A., MR.,**

Mailing Address 711 MEADOW CREST DRIVE

City  
ROCKTONState  
ILZip Code  
61072-8000FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723526

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5292 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOLEANICOV, PAVEL, A., MR.,**

Mailing Address 711 MEADOW CREST DRIVE

City  
ROCKTONState  
ILZip Code  
61072-8000FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724552

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724505

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724920

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

128.09



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5293 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726009**

Amount of Each Receipt this Period

44.18

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726237**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726264**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5294 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOLOMON, CORY, , ,**

Mailing Address 1306 S MONROE

City  
SAN ANGELOState  
TXZip Code  
76901-4420FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726083

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLOMON, CORY, , ,**

Mailing Address 1306 S MONROE

City  
SAN ANGELOState  
TXZip Code  
76901-4420FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726085

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLOMON, CORY, , ,**

Mailing Address 1306 S MONROE

City  
SAN ANGELOState  
TXZip Code  
76901-4420FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726086

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

88.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5295 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOLOMON, CORY, , ,**

Mailing Address 1306 S MONROE

City  
SAN ANGELOState  
TXZip Code  
76901-4420FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726088**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLOMON, CORY, , ,**

Mailing Address 1306 S MONROE

City  
SAN ANGELOState  
TXZip Code  
76901-4420FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726092**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLOMON, CORY, , ,**

Mailing Address 1306 S MONROE

City  
SAN ANGELOState  
TXZip Code  
76901-4420FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726093**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5296 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725229

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOMMERFELD, MARGO, , MS.,**

Mailing Address 4454 CASITAS ST.

City  
SAN DIEGOState  
CAZip Code  
92107-4218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2857.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726281

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPALLONE, ARLENE, , ,**

Mailing Address 5925 BRAE BURN CIR

City  
VERO BEACHState  
FLZip Code  
32967-5277FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723661

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5297 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27723872

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27723874

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

764.59

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27723876

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5298 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723877

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723941

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723955

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5299 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPECHT, VIVIAN, , ,**

Mailing Address PO BOX 63

City  
LYMANState  
NEZip Code  
69352-0063FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723472

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPONHOLZ, RICHARD, , ,**

Mailing Address 358 FRANKLIN ST

City  
SAN MATEOState  
CAZip Code  
94402-2214FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725475

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPRINGER, TOM, , ,**

Mailing Address 147 KELCIA CIRCLE

City  
PAGOSA SPRINGSState  
COZip Code  
81147-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723594

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

224.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5300 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STARR, CAROL, , ,**

Mailing Address 361 NEW MEADOW RD

City  
BARRINGTONState  
RIZip Code  
02806-3729FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723852

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STARR, CAROL, , ,**

Mailing Address 361 NEW MEADOW RD

City  
BARRINGTONState  
RIZip Code  
02806-3729FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723853

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STARR, CAROL, , ,**

Mailing Address 361 NEW MEADOW RD

City  
BARRINGTONState  
RIZip Code  
02806-3729FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723854

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

76.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5301 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STARR, CAROL, , ,**

Mailing Address 361 NEW MEADOW RD

City  
BARRINGTONState  
RIZip Code  
02806-3729FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723859

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STARR, CAROL, , ,**

Mailing Address 361 NEW MEADOW RD

City  
BARRINGTONState  
RIZip Code  
02806-3729FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723861

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STARR, CAROL, , ,**

Mailing Address 361 NEW MEADOW RD

City  
BARRINGTONState  
RIZip Code  
02806-3729FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725026

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5302 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STARR, CAROL, , ,**

Mailing Address 361 NEW MEADOW RD

City  
BARRINGTONState  
RIZip Code  
02806-3729FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725215**

Amount of Each Receipt this Period

12.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STAUDT, CALVIN, , ,**

Mailing Address 2617 TRIPLE CROWN DR.

City  
FLORENCEState  
SCZip Code  
29505-8753FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726126**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City  
BALL GROUNDState  
GAZip Code  
30107-2716FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725492**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5303 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27723512

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27723514

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27723519

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

14.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5304 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723521

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723522

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723656

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

15.37

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5305 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27723660

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27723697

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27723701

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

14.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5306 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723706

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723708

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723709

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5307 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27723718

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27723726

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA11A.27726304

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

11.16

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5308 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27726305**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27726306**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27726308**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3.07



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5309 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISON

State  
TN

Zip Code  
37115-5927

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

02 / 26 / 2025

**Transaction ID : SA11A.27726311**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISON

State  
TN

Zip Code  
37115-5927

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

02 / 26 / 2025

**Transaction ID : SA11A.27726312**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STILLWELL, KAREN, , ,**

Mailing Address 59501 414TH LANE

City  
NEW ULM

State  
MN

Zip Code  
56073-4220

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.13

Date of Receipt

02 / 26 / 2025

**Transaction ID : SA11A.27726147**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

21.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5310 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STOCKS, LAURENCE, , ,**

Mailing Address 290 SUSSEX PL.

City  
CARSON CITYState  
NVZip Code  
89703-5360FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723391

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOUT, GREGORY, , ,**

Mailing Address 1747 TOMMY AARON DR

City  
EL PASOState  
TXZip Code  
79936-4621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723974

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOUT, GREGORY, , ,**

Mailing Address 1747 TOMMY AARON DR

City  
EL PASOState  
TXZip Code  
79936-4621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

392.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724638

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5311 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STURGILL, LARRY, , ,**

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724860**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STURGILL, LARRY, , ,**

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725539**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725209**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5312 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SULLIVAN, CINDY, M., ,**

Mailing Address 575 SIMPSON HWY 540

City  
MENDENHALLState  
MSZip Code  
39114-9065FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.51

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723573**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SULLIVAN, CINDY, M., ,**

Mailing Address 575 SIMPSON HWY 540

City  
MENDENHALLState  
MSZip Code  
39114-9065FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.51

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723574**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TALLEY, RICHARD, , ,**Mailing Address 2777 PARADISE RD  
3606City  
LAS VEGASState  
NVZip Code  
89109-9126FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725589**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5313 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THARP, MORRIS, , ,**

Mailing Address 15243 RD 192

City  
PORTERVILLEState  
CAZip Code  
93257-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
E M THARP INCOccupation (for Individual)  
TRUCKS DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

742.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724584**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, DWANE, , ,**

Mailing Address 19140 BUCK DRIVE

City  
BENDState  
ORZip Code  
97703-8572FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725380**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, LYUBOV, , ,**

Mailing Address 14914 VINTAGE PRESERVE PKWY UNIT 5

City  
HOUSTONState  
TXZip Code  
77070-1578FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

872.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723488**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

383.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5314 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, RONALD, L., MR.,**

Mailing Address 386 HICKORY GROVE CIR

City  
HARRISONBURGState  
VAZip Code  
22801-7607FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725535**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THORPE, DEAN, , ,**

Mailing Address PO BOX 1528

City  
GOLDTHWAITEState  
TXZip Code  
76844-1528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724823**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRANZOW, FRANK, H., MR.,**

Mailing Address P.O. BOX 304

City  
RED FE LKSState  
COZip Code  
80545-0304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

403.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724879**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

248.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5315 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRANZOW, FRANK, H., MR.,**

Mailing Address P.O. BOX 304

City  
RED FE LKS

State  
CO

Zip Code  
80545-0304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

**Transaction ID : SA11A.27725477**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TREMELLING, SHERRY, , ,**

Mailing Address 1144 AIRPORT DR.

City  
ALEX CITY

State  
AL

Zip Code  
35010-3435

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
PHARMACIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

**Transaction ID : SA11A.27724543**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRUSLER, LAURA, , ,**

Mailing Address 1 HILLVIEW COURT

City  
CORTLANDT MANOR

State  
NY

Zip Code  
10567-6411

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HENDRICK HUDSON SCHOOL DISTRICT

Occupation (for Individual)  
MONITOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

237.17

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

**Transaction ID : SA11A.27724873**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

197.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5316 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TURNBOUGH, JESSICA, , ,**

Mailing Address 117 ASHLAND AVE

City  
MEDFORDState  
ORZip Code  
97504-7522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723480

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TURNER, WALEAH, , ,**

Mailing Address 501 FOREST RIDGE

City  
BROKEN ARROWState  
OKZip Code  
74014-6963FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725450

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TWISDOM, DONNA, , ,**

Mailing Address 621 HELENA CT

City  
UPLANDState  
CAZip Code  
91786-2346FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MEDTRONIC DIABETESOccupation (for Individual)  
MANAGER OF OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723486

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

192.59



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5317 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UMBARGER, BRENDA, L., ,**

Mailing Address P.O. BOX 1774

City  
FRITCHState  
TXZip Code  
79036-1774FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724482

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. URREIZTIETA, IREL, , ,**

Mailing Address 180 KODIAK ST

City  
MORRO BAYState  
CAZip Code  
93442-3016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724153

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. URREIZTIETA, IREL, , ,**

Mailing Address 180 KODIAK ST

City  
MORRO BAYState  
CAZip Code  
93442-3016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

477.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726214

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5318 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723678**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724004**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27726313**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

19.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5319 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VASEK, GARY, R., MR.,**

Mailing Address 6387 ASHCROFT DR.

City  
COLORADO SPRINGSState  
COZip Code  
80918-3241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.85

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723684**

Amount of Each Receipt this Period

11.45

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VENNUM, PAULINE, , ,**

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDOState  
FLZip Code  
32801-4360FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.43

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27726066**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VERPLANCK, JAMES, S., MR.,**

Mailing Address 3525 BRIDGEFIELD DR.

City  
LAKELANDState  
FLZip Code  
33803-5912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.95

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725449**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

14.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5320 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VILLANUEVA, SALVADOR, , ,**

Mailing Address 215 ROBINHOOD DR.

City  
JUNCTION CITYState  
KSZip Code  
66441-9773FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.88

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725912**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723727**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALL, SHALOM, , ,**

Mailing Address 71 WOODLAND ROAD

City  
WOODCLIFF LAKEState  
NJZip Code  
07677-7846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725440**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5321 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALLING, FRANCES, J., ,**

Mailing Address 14604 E 37TH ST S

City  
INDEPENDENCEState  
MOZip Code  
64055-3436FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.04

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724729**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALLING, FRANCES, J., ,**

Mailing Address 14604 E 37TH ST S

City  
INDEPENDENCEState  
MOZip Code  
64055-3436FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.04

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724734**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRISTOL MYERS SQUIBBOccupation (for Individual)  
COMPETITIVE INTELLIGENCE STRAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.41

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723847**

Amount of Each Receipt this Period

1.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5322 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723893**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724536**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724979**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5323 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, PAMELA, , ,**

Mailing Address 4684 N QUAIL LAKE DR.

City  
CLOVISState  
CAZip Code  
93619-4645FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MERCHANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724583

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEATHERLY, CINDI, , ,**

Mailing Address 4690 MEADOW SPRINGS DRIVE

City

WATKINSVILLE

State

GA

Zip Code

30677-4642

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724488

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEBB, ROSS, A., MR.,**

Mailing Address 6312 N LE MAI AVE.

City

CHICAGO

State

IL

Zip Code

60646-4828

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

822.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724454

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5324 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEIGAND, CRAIG, , MR.,**

Mailing Address 2289 S ISABELL ST

City  
LAKEWOODState  
COZip Code  
80228-6460FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.43

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723642**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEIGAND, CRAIG, , MR.,**

Mailing Address 2289 S ISABELL ST

City  
LAKEWOODState  
COZip Code  
80228-6460FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.43

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724159**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEIGAND, CRAIG, , MR.,**

Mailing Address 2289 S ISABELL ST

City  
LAKEWOODState  
COZip Code  
80228-6460FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.43

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724377**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36.99



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5325 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEIGAND, CRAIG, , MR.,**

Mailing Address 2289 S ISABELL ST

City  
LAKEWOODState  
COZip Code  
80228-6460FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724401**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTFALL, ANNE, , ,**

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIAState  
WAZip Code  
98531-8894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724132**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WESTFALL, ANNE, , ,**

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIAState  
WAZip Code  
98531-8894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

479.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724299**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

16.11

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5326 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WESTFALL, ANNE, , ,

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIAState  
WAZip Code  
98531-8894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724673

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WESTFALL, ANNE, , ,

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIAState  
WAZip Code  
98531-8894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725017

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WETZEL, JOAN, C., MS.,

Mailing Address 2508 PINE ST. APT. F

City  
NEW ORLEANSState  
LAZip Code  
70125-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

329.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724050

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

43.73

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5327 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITEMORE, BEBE, , ,**

Mailing Address 4785 MURFREESBORO ROAD

City  
ARRINGTON

State  
TN

Zip Code  
37014-9171

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27724646**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WICKLINE, RICHARD, , ,**

Mailing Address 1125 MCGEE CT NE  
UNIT 372

City  
SALEM

State  
OR

Zip Code  
97303-9469

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.22

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27725385**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLIN

State  
TN

Zip Code  
37067-8238

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

371.31

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

**Transaction ID : SA11A.27724639**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

123.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5328 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724641

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724642

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

371.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724644

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

47.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5329 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27724650

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, JIMMY, O., MR.,**

Mailing Address 1075 MOTORCOACH DR

City  
POLK CITYState  
FLZip Code  
33868-5113FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725576

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, JEAN, , ,**

Mailing Address 5644 ARAL DRIVE

City  
LAKELANDState  
FLZip Code  
33805-9615FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27726017

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

34.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5330 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, RANSOM, , MR.,**Mailing Address 1050 PARK AVENUE  
12CCity  
NEW YORKState  
NYZip Code  
10028-1031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.51

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725010

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, RITA, , MS.,**

Mailing Address 2492 STAG RUN BLVD.

City  
CLEARWATERState  
FLZip Code  
33765-1832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27725213

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WYANDT, YON, , ,**

Mailing Address 3739 SPRING COULEE RD

City  
BELLINGHAMState  
WAZip Code  
98226-8887FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11A.27723444

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

622.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5331 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WYANDT, YON, , ,**

Mailing Address 3739 SPRING COULEE RD

City  
BELLINGHAMState  
WAZip Code  
98226-8887FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.12

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723461**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WYANDT, YON, , ,**

Mailing Address 3739 SPRING COULEE RD

City  
BELLINGHAMState  
WAZip Code  
98226-8887FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.12

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27723492**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WYANDT, YON, , ,**

Mailing Address 3739 SPRING COULEE RD

City  
BELLINGHAMState  
WAZip Code  
98226-8887FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.12

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27725458**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5332 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YEO, ANDREW, , ,**

Mailing Address 8131 CEDAR RUN DR

City  
MARTINSVILLEState  
INZip Code  
46151-9028FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725078**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNG, DIANE, , ,**

Mailing Address 1756 PORTAL WAY

City  
SANDYState  
UTZip Code  
84093-6831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27723782**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YOUNGBLUT, JOANNE, M., DR.,**

Mailing Address 1655 KNUDSON RUN

City  
THE VILLAGESState  
FLZip Code  
32163-5415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

347.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725168**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5333 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNG, PATRICIA, , ,**

Mailing Address 9940 PREMIERE VIEW CIR

City  
HAGERSTOWNState  
MDZip Code  
21740-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.42

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724139**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZAPERACH, TERRY, , ,**

Mailing Address 746 LANTANA ST.

City  
COCOAState  
FLZip Code  
32926-5246FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.96

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724636**

Amount of Each Receipt this Period

7.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZAVARZINA, ANYA, , ,**

Mailing Address 802 N DELAWARE ST, 211

City  
SAN MATEOState  
CAZip Code  
94401-1514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GALLIUM ARTISTIC SERVICES SIMSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.60

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA11A.27724912**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

18.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5334 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZAVARZINA, ANYA, , ,**

Mailing Address 802 N DELAWARE ST, 211

City  
SAN MATEOState  
CAZip Code  
94401-1514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GALLIUM ARTISTIC SERVICES SIMSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724922**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZEGARELLI, BRENDA, B., MS.,**

Mailing Address 3460 INDIAN LAKE LN.

City  
PELHAMState  
ALZip Code  
35124-2716FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27724948**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZINN, DAVID, D., DR.,**

Mailing Address 720 E 6TH ST

City  
ANNISTONState  
ALZip Code  
36207-5831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NEARMCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

444.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11A.27725665**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

67.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5335 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

**Transaction ID : SA11C.27727651**

Amount of Each Receipt this Period

121866.63

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABBOTT, DONA, M., MS.,**

Mailing Address 776 BLACK BRANCH RD

City  
RABUN GAPState  
GAZip Code  
30568-2502FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

373.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

**Transaction ID : SA11A.27730458**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ACRONICO, EUGENE, , ,**

Mailing Address 4680 KLAHANIE DR. SE

City  
ISSAQUAHState  
WAZip Code  
98029-FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

**Transaction ID : SA11A.27729099**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶

140.54

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5336 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADKINS, JANET, , ,**

Mailing Address 3301 JENNINGS DRIVE

City  
SPRINGFIELDState  
ILZip Code  
62704-5536FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.50

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729504**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AHN, ROGER, , ,**

Mailing Address 2807 NORTH 160 STREET

City  
OMAHAState  
NEZip Code  
68116-2061FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.90

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728799**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AHN, ROGER, , ,**

Mailing Address 2807 NORTH 160 STREET

City  
OMAHAState  
NEZip Code  
68116-2061FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

373.90

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730718**

Amount of Each Receipt this Period

12.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5337 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALBERS, GREGG, , ,**

Mailing Address 220 FOX BRIAR LN

City  
MADISON HEIGHTSState  
VAZip Code  
24572-2770FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CVFPOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727966**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALFARO, ROSA, , ,**

Mailing Address 3059 HAWKSCREST DR

City  
WINCHESTERState  
CAZip Code  
92596-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729632**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALIOTA, PAULETTE, , ,**

Mailing Address 538 MARGO COURT

City  
ERIEState  
PAZip Code  
16505-2112FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1027.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728002**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5338 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALIOTA, PAULETTE, , ,**

Mailing Address 538 MARGO COURT

City  
ERIEState  
PAZip Code  
16505-2112FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728322

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALIOTA, PAULETTE, , ,**

Mailing Address 538 MARGO COURT

City  
ERIEState  
PAZip Code  
16505-2112FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729562

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALKIRE, MAUNIE LOU, , ,**

Mailing Address 6 SUMMIT DRIVE

City

KIMBERLING CITY

State  
MOZip Code  
65686-9418FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

341.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728148

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

127.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5339 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALKIRE, MAUNIE LOU, , ,**

Mailing Address 6 SUMMIT DRIVE

City  
KIMBERLING CITYState  
MOZip Code  
65686-9418FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729971

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CYNNIE, , ,**

Mailing Address 55 RODEO AVENUE # 5

City  
SAUSALITOState  
CAZip Code  
94965-1738FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729750

Amount of Each Receipt this Period

106.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, MARK, , ,**

Mailing Address 50 DONOVAN FARM WAY

City  
NORWELLState  
MAZip Code  
02061-2538FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728927

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

212.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5340 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, SHARON, E., MRS.,**

Mailing Address 12 LIBERTY ST

City  
BEVERLYState  
MAZip Code  
01915-3728FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MASS GENERAL HOSPITALOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728684**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, SHARON, E., MRS.,**

Mailing Address 12 LIBERTY ST

City  
BEVERLYState  
MAZip Code  
01915-3728FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MASS GENERAL HOSPITALOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728723**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDREWS, KELLI, , MS.,**

Mailing Address 6605 RIMROCK DRIVE

City  
IDAHO FALLSState  
IDZip Code  
83401-8001FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727723**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.04



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5341 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDREWS, KELLI, , MS.,**

Mailing Address 6605 RIMROCK DRIVE

City  
IDAHO FALLSState  
IDZip Code  
83401-8001FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729321**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANSARI, AMIR, H., MR.,**

Mailing Address 1981 PARK CHASE LN NE

City  
ATLANTAState  
GAZip Code  
30324-2738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728291**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANSARI, AMIR, H., MR.,**

Mailing Address 1981 PARK CHASE LN NE

City  
ATLANTAState  
GAZip Code  
30324-2738FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

319.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729805**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5342 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARGENTIERI, JOANN, , ,**Mailing Address **BOX 9512**City  
**FORT LAUDERDALE**State  
**FL**Zip Code  
**33310-9512**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**450.00**

Date of Receipt

**02 / 27 / 2025****Transaction ID : SA11A.27727699**

Amount of Each Receipt this Period

**100.00**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARNOLD, RUSSELL, , ,**Mailing Address **966 BLUESTEM DRIVE**City  
**GENEVA**State  
**IL**Zip Code  
**60134-3732**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**RETIRED**Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**753.64**

Date of Receipt

**02 / 27 / 2025****Transaction ID : SA11A.27730155**

Amount of Each Receipt this Period

**52.05**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ASIA, DANIEL, ISAAC, MR.,**Mailing Address **5230 N. APACHE HILLS TRAIL**City  
**TUCSON**State  
**AZ**Zip Code  
**85750-7108**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**DANIEL ASIA**Occupation (for Individual)  
**COMPOSER/PROFESSOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**02 / 27 / 2025****Transaction ID : SA11A.27727925**

Amount of Each Receipt this Period

**250.00**☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►**402.05**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5343 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAILEY, ANN, , ,**

Mailing Address 104 CLUB PLACE CT

City

WARNER ROBINS

State

GA

Zip Code

31088-7551

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

733.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727660

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAILEY, ANN, , ,**

Mailing Address 104 CLUB PLACE CT

City

WARNER ROBINS

State

GA

Zip Code

31088-7551

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

733.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727664

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAILEY, ANN, , ,**

Mailing Address 104 CLUB PLACE CT

City

WARNER ROBINS

State

GA

Zip Code

31088-7551

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

733.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727669

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5344 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAILEY, ANN, , ,**

Mailing Address 104 CLUB PLACE CT

City  
WARNER ROBINS

State  
GA

Zip Code  
31088-7551

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.75

Date of Receipt

**02** / **27** / **2025**

**Transaction ID : SA11A.27730153**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAKER, JOHN, , ,**

Mailing Address 3054 HWY 223

City  
DEWITT

State  
KY

Zip Code  
40930-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.93

Date of Receipt

**02** / **27** / **2025**

**Transaction ID : SA11A.27728095**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAKER, JOHN, , ,**

Mailing Address 3054 HWY 223

City  
DEWITT

State  
KY

Zip Code  
40930-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

415.93

Date of Receipt

**02** / **27** / **2025**

**Transaction ID : SA11A.27728861**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

170.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5345 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BALDWIN, JAMES, , MR.,**

Mailing Address 9 MAURA LANE

City  
DANBURYState  
CTZip Code  
06810-7118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.65

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729080

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BANGERT, MARILYN, , MRS.,**

Mailing Address 8713 US HWY 85

City  
FORT LUPTONState  
COZip Code  
80621-9309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730529

Amount of Each Receipt this Period

32.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARBER, WILLIAM, , ,**

Mailing Address 408 COLLEGE AVE

City  
WEST CHESTERState  
PAZip Code  
19382-3556FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BUCKEYE PARTNERSOccupation (for Individual)  
PIPELINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

448.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727849

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5346 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARGER, BENJAMIN, , ,**

Mailing Address 2732 IRETON TREES ROAD

City  
MOSCOWState  
OHZip Code  
45153-9101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728359**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARILLARO, MARYANN, , MS.,**Mailing Address 130 WATER ST  
APT 1ACity  
NEW YORKState  
NYZip Code  
10005-1622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.36

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730075**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARNETT, EARL, , ,**

Mailing Address 1404 DRUMMOND CEMETERY RD

City  
JASPERState  
ALZip Code  
35504-5408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.32

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729271**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5347 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BECKENDORF, J, SCOTT, ,**

Mailing Address 7 IRONWOOD ROAD

City  
SAN ANTONIOState  
TXZip Code  
78212-2541FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WINE CONSULTANTSOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729175**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BELL, SAMUEL, , ,**

Mailing Address 3825 SWEET MAGNOLIA DR.

City  
GAINESVILLEState  
GAZip Code  
30504-5949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.64

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728689**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BENNETT, CRAIG, , MR.,**

Mailing Address 9953 E BALANCING ROCK RD

City  
SCOTTSDALEState  
AZZip Code  
85262-2363FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UTILITY TRAILER MANUFACTURING COOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727865**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

205.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5348 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BENSON, PATTI, , ,**

Mailing Address PO BOX 158

City  
EUREKAState  
NVZip Code  
89316-0158FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729087

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BENTON, DONNA, , ,**

Mailing Address 1751 U.S. 98

City  
DESTINState  
FLZip Code  
32541-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730445

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERTI MAYA, ROSSANA, VESCO, ,**

Mailing Address 5345 REDONDO WAY

City  
DELRAY BEACHState  
FLZip Code  
33484-8393FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728859

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

191.15



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5349 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BESWICK, JANE, ELIZABETH, MS.,**

Mailing Address PO BOX 153

City  
FRENCH CAMPState  
MSZip Code  
39745-0153FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728416**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728306**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728367**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5350 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISON

State  
NJ

Zip Code  
08820-4200

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27730374**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISON

State  
NJ

Zip Code  
08820-4200

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27730646**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISON

State  
NJ

Zip Code  
08820-4200

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27730691**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

154.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5351 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730628**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730631**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730632**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5352 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730633

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730634

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730635

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

76.24

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5353 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730636**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730637**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730638**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

116.24

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5354 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730639

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730640

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730641

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5355 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BINGHAM, GLENN, S., MR.,**

Mailing Address 721 STEWARTS RD

City  
LANEXAState  
VAZip Code  
23089-8804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728897

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BINGHAM, GLENN, S., MR.,**

Mailing Address 721 STEWARTS RD

City  
LANEXAState  
VAZip Code  
23089-8804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728950

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BISHOP, DANNY, , ,**

Mailing Address 2050 W LAKE HAMILTON DR.

City  
WINTER HAVENState  
FLZip Code  
33881-9284FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727795

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

172.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5356 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACKMON, HARRY, , ,**

Mailing Address 708 PISGAH RD.

City  
FLORENCEState  
SCZip Code  
29501-6703FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728512**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727825**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728175**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

143.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5357 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728178**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLACKWELL, KATHLEEN, , ,**

Mailing Address 4911 TIMBERLINE DR

City  
AUSTINState  
TXZip Code  
78746-5534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728308**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLACKSTONE, MICHAEL, , ,**

Mailing Address 2358 RIVERSIDE AVEVILLA RIVA 106

City  
JACKSONVILLEState  
FLZip Code  
32204-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MICHAEL BLACKSTONEOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1001.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727662**

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

307.69

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5358 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLANKENSHIP, KATHY, , ,**

Mailing Address 125 ORCHARD DR.

City  
ELIDA

State  
OH

Zip Code  
45807-1084

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27730333**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLUHM, JAMES, E., MR.,**

Mailing Address 16376 SE 89TH TERRACE

City

SUMMERFIELD

State

FL

Zip Code

34491-5804

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27730113**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLUHM, JAMES, E., MR.,**

Mailing Address 16376 SE 89TH TERRACE

City

SUMMERFIELD

State

FL

Zip Code

34491-5804

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

424.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27730611**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5359 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLYTHE, MARGARET, E., MRS.,**

Mailing Address 160 CO. RD. 361

City  
FORT PAYNEState  
ALZip Code  
35967-5145FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.05

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729894**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOATMAN, BARBARA, , ,**

Mailing Address 8836N MAY AVE #70

City  
OKLAHOMA CITYState  
OKZip Code  
73120-4472FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728606**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOLING, JEANNE, , ,**

Mailing Address 5512 CHEVAUX COURT

City  
LITTLE ROCKState  
ARZip Code  
72223-4463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

389.55

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728234**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

337.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5360 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOROS, ELSIE, I., MRS.,**

Mailing Address 3432 MEADOW WOODS DR.

City  
BIRMINGHAMState  
ALZip Code  
35216-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729643**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOSMA, RACHEL, , ,**

Mailing Address 4078 SAGE SPRINGS

City  
KIMBERLYState  
IDZip Code  
83341-5370FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728428**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOSS, CLINTON, , ,**

Mailing Address 10242 MATTOCK AVENUE

City  
DOWNEYState  
CAZip Code  
90241-3003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

521.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727848**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5361 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYKIN, LYNNE, , ,**

Mailing Address 3394 KENNEDY AVENUE

City  
THE VILLAGESState  
FLZip Code  
32163-6345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730584**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRACKEN, KAY, , ,**

Mailing Address 405 HAMVASY

City  
TYLERState  
TXZip Code  
75701-5324FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRACKEN INTERESTOccupation (for Individual)  
OIL AND GAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2334.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728811**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROADHEAD, ANN, B., ,**

Mailing Address PO BOX 2348

City  
KILL DEVIL HILLSState  
NCZip Code  
27948-2348FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728285**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5362 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRODERICK, FRANCIS, , ,**

Mailing Address 16 DUCK POND LN

City  
RAMSEYState  
NJZip Code  
07446-1643FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.43

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727765

Amount of Each Receipt this Period

1.56

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRODIE, MARY, F., ,**

Mailing Address 17138 RIVER BLUFF DRIVE

City  
UNION PIERState  
MIZip Code  
49129-9478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730468

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRUMBAUGH, PHILIP, C., MR.,**

Mailing Address 108 PHILIP DR

City  
WEST MILTONState  
OHZip Code  
45383-1330FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727677

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

261.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5363 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRUMBAUGH, PHILIP, C., MR.,**

Mailing Address 108 PHILIP DR

City  
WEST MILTONState  
OHZip Code  
45383-1330FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727750

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUCKLEY, JAYNE, , ,**

Mailing Address 2824 SIMPSON AVENUE

City  
OCEAN CITYState  
NJZip Code  
08226-2367FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729777

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURNS, MICHAEL, J., ,**

Mailing Address 7287 HORIZON DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728675

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

74.76

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5364 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUSBY, CHARLOTTE, , ,**

Mailing Address 5110 BEECH ST

City  
BELLAIREState  
TXZip Code  
77401-3327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1628.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729613**

Amount of Each Receipt this Period

19.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUTLER, SUSAN, , ,**

Mailing Address 6438 NORTH DESERT WIND CIRCLE

City  
TUCSONState  
AZZip Code  
85750-0978FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730320**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUTZER, DONNA, , ,**

Mailing Address 943 WELKIN COURT

City  
CONWAYState  
SCZip Code  
29526-9275FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

388.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728379**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.03



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5365 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUTZER, DONNA, , ,**

Mailing Address 943 WELKIN COURT

City  
CONWAYState  
SCZip Code  
29526-9275FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728507

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727824

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730451

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5366 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730452

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730454

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CHARLES, , ,**

Mailing Address 5540 SARATOGA BLVD STE 200

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRCOccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3411.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730456

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

94.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5367 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CANNON, MARGARET, , ,**

Mailing Address 3211 BARONESS CT

City  
PLANT CITYState  
FLZip Code  
33565-5603FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730351**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARNEY, JOSEPH, , ,**

Mailing Address 1540 PEACH DRIVE

City  
AVONState  
OHZip Code  
44011-1478FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JDCAOccupation (for Individual)  
ATTORNEY ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728243**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNELLO, MARILYN, D., ,**

Mailing Address 38 WARD STREET

City  
RANDOLPHState  
MAZip Code  
02368-4625FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BROCKTON VISITING NURSE ASSOCIATIONOccupation (for Individual)  
CNA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

431.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729106**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5368 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

**Transaction ID : SA11A.27728161**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

**Transaction ID : SA11A.27729419**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

**Transaction ID : SA11A.27729436**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5369 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729547**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730080**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARR, HARLEY, , MR.,**

Mailing Address 17011 CEDAR PLZ APT 6C

City  
OMAHAState  
NEZip Code  
68130-2379FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

482.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729578**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5370 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARRUTHERS, ROGER, , ,**

Mailing Address 26024 W HORSHAM DR.

City  
BUCKEYEState  
AZZip Code  
85396-2061FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728235**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CERNUDA, HERMINIO, L., MR.,**

Mailing Address 5320 SW 5TH TER

City  
CORAL GABLESState  
FLZip Code  
33134-1126FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730484**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAMBERLIN, DONNA, , ,**

Mailing Address 6940 LIGHTHOUSE POINT

City  
MAINEVILLEState  
OHZip Code  
45039-9454FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728112**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5371 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHASEN, STEVE, , ,**

Mailing Address 105 CRAVEN COURT

City  
TAUNTONState  
MAZip Code  
02780-8008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728344

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHELLIS, MIKE, , ,**

Mailing Address 8354 LUCE CT

City  
SPRINGFIELDState  
VAZip Code  
22153-3318FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DHHSOccupation (for Individual)  
PHA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728010

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHOW, ADA, , ,**

Mailing Address 2100 TOWERS , PH1

City  
COCOA BEACHState  
FLZip Code  
32931-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1010.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728150

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

239.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5372 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHOW, ADA, , ,**

Mailing Address 2100 TOWERS , PH1

City  
COCOA BEACHState  
FLZip Code  
32931-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728158

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CIACCIO, JANE, , ,**Mailing Address 5491 BEECHMONT AVE  
APT 506City  
CINCINNATIState  
OHZip Code  
45230-1160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

841.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730201

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CIMINO, SHIRLEY, R., MS.,**

Mailing Address 44601 MONTEREY AVE. APT. A219

City  
PALM DESERTState  
CAZip Code  
92260-3368FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727712

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

188.49

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5373 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLAPP, WILLIAM, , MR.,**

Mailing Address 1115 COPPER MOON LANE

City  
NORTH LAS VEGASState  
NVZip Code  
89031-1910FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729007**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, BARBARA, W., MRS.,**

Mailing Address 1170 GORDON COMBS RD NW

City  
MARIETTAState  
GAZip Code  
30064-1226FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ELEGANT IDEAS INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727724**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLARK, BARBARA, W., MRS.,**

Mailing Address 1170 GORDON COMBS RD NW

City  
MARIETTAState  
GAZip Code  
30064-1226FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ELEGANT IDEAS INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

562.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727751**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5374 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLAY, GLORY ANN, , ,**

Mailing Address 208 HALFHILL LANE

City  
NICHOLASVILLEState  
KYZip Code  
40356-6622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.95

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728039**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLEMENTS, ASHLEY, , ,**

Mailing Address 3950 WHEELER ROAD

City  
BAY CITYState  
MIZip Code  
48706-1857FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CLEMENTS CONTRACTINGOccupation (for Individual)  
OFFICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.90

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729139**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLEMENTS, ASHLEY, , ,**

Mailing Address 3950 WHEELER ROAD

City  
BAY CITYState  
MIZip Code  
48706-1857FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CLEMENTS CONTRACTINGOccupation (for Individual)  
OFFICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

585.90

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730574**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5375 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COCHRAN, EMMA JANE, , ,**

Mailing Address 8311 MORNINGSIDE DRIVE

City  
MANASSASState  
VAZip Code  
20112-3513FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.70

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727908**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COE, CRAIG, , ,**

Mailing Address 1601 DEERPATH ROAD

City  
DOTHANState  
ALZip Code  
36303-2174FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728488**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLUCCI, MARYLOU, , ,**

Mailing Address 127 BAYVIEW LN

City  
STATEN ISLANDState  
NYZip Code  
10309-3638FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

344.45

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729283**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

173.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5376 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONNOLLY, DONNA, MARIE, MS.,**Mailing Address 6881 IL REGALO CIR  
APT 112City  
NAPLESState  
FLZip Code  
34109-6818FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729906**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONSTANZI, CHARLES, B., ,**

Mailing Address P.O. BOX 670

City  
PRINCETONState  
LAZip Code  
71067-0670FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

743.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728288**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COOMBES, JIM, , MR.,**Mailing Address 7031 BEACH DR. SW  
APT DCity  
SEATTLEState  
WAZip Code  
98136-2095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CONSTRUCTION PLANNING AND M.Occupation (for Individual)  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728726**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

128.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5377 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COONLY, JOHN, , ,**

Mailing Address 300 WEST AVE APT 2326

City  
AUSTINState  
TXZip Code  
78701-3808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730046**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COULTER, DON, A., ,**

Mailing Address 2122 OLD FOUNDRY RD

City  
WEATHERFORDState  
TXZip Code  
76087-2107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730275**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRABTREE, CYNTHIA, , ,**

Mailing Address 13411 FM 807

City  
DALHARTState  
TXZip Code  
79022-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

354.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728669**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5378 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRABTREE, CYNTHIA, , ,**

Mailing Address 13411 FM 807

City  
DALHARTState  
TXZip Code  
79022-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730223**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727716**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIGO, JACQUELINE, L., MS.,**

Mailing Address 1049 SUMMIT DR

City  
MOUNT VERNONState  
OHZip Code  
43050-9576FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1371.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728473**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5379 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAMER, JOHN, , ,**

Mailing Address 6248 ENCLAVE CIR

City  
JOHNSTONState  
IAZip Code  
50131-4796FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728253

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAMPHORN, ANN, , ,**

Mailing Address 6530 COUNTY ROAD 338

City  
CHIRENOState  
TXZip Code  
75937-3246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728641

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CROWELL, ELAINE, , ,**

Mailing Address 7325 BROOKWOOD WAY

City  
CUMMINGState  
GAZip Code  
30041-8304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728266

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

226.83

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5380 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CROZIER, MARILYN, , ,**

Mailing Address 11928 FARWELL ROAD

City  
PHILADELPHIA

State  
PA

Zip Code  
19154-3419

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.22

Date of Receipt

**02** / **27** / **2025**

**Transaction ID : SA11A.27728692**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CROZIER, MARILYN, , ,**

Mailing Address 11928 FARWELL ROAD

City  
PHILADELPHIA

State  
PA

Zip Code  
19154-3419

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.22

Date of Receipt

**02** / **27** / **2025**

**Transaction ID : SA11A.27728698**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CROZIER, MARILYN, , ,**

Mailing Address 11928 FARWELL ROAD

City  
PHILADELPHIA

State  
PA

Zip Code  
19154-3419

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.22

Date of Receipt

**02** / **27** / **2025**

**Transaction ID : SA11A.27729312**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

48.90



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5381 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CULBERTSON, LLOYD, , ,**

Mailing Address 10705S SW 69TH CT.

City  
PINECRESTState  
FLZip Code  
33156-3932FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2025

**Transaction ID : SA11A.27730139**

Amount of Each Receipt this Period

38.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CULLEN, MERCEDES, , MRS.,**

Mailing Address 8610 125TH ST

City  
RICHMOND HILLState  
NYZip Code  
11418-2643FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2025

**Transaction ID : SA11A.27730548**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CUNNINGHAM, JACQUELINE, , ,**

Mailing Address 1203 MCCLEARY TER APT 208

City  
BEL AIRState  
MDZip Code  
21014-4547FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2025

**Transaction ID : SA11A.27729670**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5382 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURTIN, DINO, ALLEN, MR.,**

Mailing Address 228 U ST

City  
RIO LINDAState  
CAZip Code  
95673-1337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1405.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728423**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. D'ARMOND, DAVID, B., ,**

Mailing Address 2800 VIA ROSSO ST UNIT 502

City  
SPRINGFIELDState  
ILZip Code  
62703-6803FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728732**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAHIN, JOHN, , ,**

Mailing Address 224 RIDGEWOOD ST

City  
ALTAMONTE SPRINGSState  
FLZip Code  
32701-7613FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730314**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

138.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5383 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAHLBERG, NANCY, , MRS.,**

Mailing Address 208 PONDEROSA PINE DR

City  
BLUE EYEState  
MOZip Code  
65611-8244FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INTERIOR DESIGNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729399**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DALE, PAMELA, , ,**

Mailing Address 18890 TIMBERLAKE DR

City  
CLAREMOREState  
OKZip Code  
74017-1443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728157**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DALMAN, RONALD, , ,**

Mailing Address 701 RETREST DRIVE 137

City  
NAPLESState  
FLZip Code  
34110-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729380**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5384 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729180**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729183**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729184**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.45

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5385 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729185**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729186**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729191**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5386 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729195**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DARDEN, GEORGE, RANDOLPH, MR.,**

Mailing Address 661 BLACK BAYOU RD

City  
ROLLING FORKState  
MSZip Code  
39159-4939FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DARDEN COMPANY LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729231**

Amount of Each Receipt this Period

94.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DARLING, GARY, , ,**

Mailing Address 501 E GUIDRY ST

City  
COVINGTONState  
LAZip Code  
70433-3942FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

568.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728786**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5387 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DARR, LUCY, , ,**

Mailing Address 1017 GADWALL CIR

City  
HENDERSONVILLEState  
TNZip Code  
37075-6321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730240**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729458**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730253**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5388 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730676

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730678

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAY, CAROLYN, , ,**

Mailing Address 15757 PINES BLVD

City  
PEMBROKE PINESState  
FLZip Code  
33027-1207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

466.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728382

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

84.05



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5389 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAY, SHARON, , ,**

Mailing Address 85 CARTER DR.

City  
NORTH MONMOUTH

State  
ME

Zip Code  
04265-6019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.84

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

**Transaction ID : SA11A.27727656**

Amount of Each Receipt this Period

12.22

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAY, SHARON, , ,**

Mailing Address 85 CARTER DR.

City  
NORTH MONMOUTH

State  
ME

Zip Code  
04265-6019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.84

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

**Transaction ID : SA11A.27727659**

Amount of Each Receipt this Period

12.22

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEKAM, MARY, , ,**

Mailing Address 6460 S 7 MILE RD

City  
FALMOUTH

State  
MI

Zip Code  
49632-9771

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GREAT LAKES DAIRY SUPPLY

Occupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.84

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

**Transaction ID : SA11A.27730570**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

73.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5390 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DELZELL, ROBERT, , ,**

Mailing Address 1482 EAST VALLEY ROAD

City  
SANTA BARBARAState  
CAZip Code  
93108-1200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727820**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DELZELL, ROBERT, , ,**

Mailing Address 1482 EAST VALLEY ROAD

City  
SANTA BARBARAState  
CAZip Code  
93108-1200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730707**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEPUY, GALE, , ,**

Mailing Address 13145 ST RT 26

City  
MARIETTAState  
OHZip Code  
45750-7714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730544**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

281.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5391 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DESSAUER, MARILYNN, , ,**

Mailing Address 8679 BLUE FLAG WAY

City  
NAPLESState  
FLZip Code  
34109-4300FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730465**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEVRIES, EDWARD, , ,**

Mailing Address 122 PINERIDGE LOOP

City  
CROSSVILLEState  
TNZip Code  
38558-6536FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729200**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIAS PINTO, CHERYL, , ,**

Mailing Address 4831 S KILPATRICK AVENUE

City  
CHICAGOState  
ILZip Code  
60632-4828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728342**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5392 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIONNE, DOUGLAS, , ,**

Mailing Address 6122 WINDY KNL

City  
WINDCRESTState  
TXZip Code  
78239-2655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729021**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DONAT, NICOLETTA, , ,**Mailing Address 1841 CENTRAL PARK AVE  
APT 1GCity  
YONKERSState  
NYZip Code  
10710-2946FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

621.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727968**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DONOVAN, ANNE, , ,**

Mailing Address 4 WEDGE LANE

City  
SELDENState  
NYZip Code  
11784-3309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

498.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729328**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5393 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOWNING, GEORGE, , ,**

Mailing Address 1308 EAST JULIE DRIVE

City  
TEMPEState  
AZZip Code  
85283-3117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728925

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOWNING, GEORGE, , ,**

Mailing Address 1308 EAST JULIE DRIVE

City  
TEMPEState  
AZZip Code  
85283-3117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728926

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNLEVY, PATRICIA, , ,**

Mailing Address 5121 BROWNSTONE DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-6028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728068

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5394 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNLEVY, PATRICIA, , ,**

Mailing Address 5121 BROWNSTONE DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-6028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728077

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNLEVY, PATRICIA, , ,**

Mailing Address 5121 BROWNSTONE DRIVE

City  
FLOWER MOUNDState  
TXZip Code  
75028-6028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729096

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNNIVAN, BRYAN, D., MR.,**

Mailing Address 2348 EDSSEL DR.

City  
MILPITASState  
CAZip Code  
95035-6110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PACIFIC ASSOCIATESOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730400

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5395 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNNING, JAMES, , ,**

Mailing Address 1478 BILL THOMPSON RD

City  
KUTTAWAState  
KYZip Code  
42055-5914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARMYOccupation (for Individual)  
FINANCIAL MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729282

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNNING, JAMES, , ,**

Mailing Address 1478 BILL THOMPSON RD

City  
KUTTAWAState  
KYZip Code  
42055-5914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARMYOccupation (for Individual)  
FINANCIAL MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729295

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNNING, JAMES, , ,**

Mailing Address 1478 BILL THOMPSON RD

City  
KUTTAWAState  
KYZip Code  
42055-5914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARMYOccupation (for Individual)  
FINANCIAL MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

389.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729298

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

194.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5396 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EADES, LINDA, , ,**

Mailing Address 14250 STATE ROUTE JJ

City  
WEST PLAINSState  
MOZip Code  
65775-5834FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730566

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EASOW, BABU, , ,**

Mailing Address 29 INDIAN RUN

City  
EAST QUOGUEState  
NYZip Code  
11942-4947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729114

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728147

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.62



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5397 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728320

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730077

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City

PAWLEYS ISLAND

State

SC

Zip Code

29585-6174

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

640.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728441

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

97.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5398 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ECKLES, VICKIE, , ,**

Mailing Address 40 LEBANON AVE

City  
GREENVILLEState  
PAZip Code  
16125-1918FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.70

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728203**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EIDENT, JOAN, , ,**

Mailing Address 34 MIDDLESEX ST

City  
N CHELMSFORDState  
MAZip Code  
01863-1514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.43

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728459**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELDAR, LUE ANN, , ,**

Mailing Address 1632 HARMON COVE TOWER

City  
SECAUCUSState  
NJZip Code  
07094-1766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AMAZONOccupation (for Individual)  
E-COMMERCE OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.20

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730571**

Amount of Each Receipt this Period

9.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5399 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELIASSEN, JAMES, M., DR.,**

Mailing Address 1205 20TH ST SO

City  
VIRGINIAState  
MNZip Code  
55792-3724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730655**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMBORGO, MARITESS, , ,**

Mailing Address 62 WATERFORD CIRCLE

City  
NACOGDOCHESState  
TXZip Code  
75965-8730FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.96

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729607**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.56

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728120**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5400 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728130

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728132

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUARTState  
FLZip Code  
34996-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728134

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

44.43

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5401 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMILSON, CARL, G., ,**

Mailing Address 435 SE KRUEGER PKWY

City  
STUART

State  
FL

Zip Code  
34996-2507

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27728139**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EWING, DONNA, , MS.,**

Mailing Address 18106 REDBUD CIRCLE

City  
FOUNTAIN VALLEY

State  
CA

Zip Code  
92708-5753

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27728061**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FALBO, ANNA, C., ,**

Mailing Address 1969 LINCOLN AVENUE

City  
EAST MEADOW

State  
NY

Zip Code  
11554-2521

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27730349**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

142.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5402 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FARRINGTON, ARTHUR, , ,**

Mailing Address 8145 MAJORS RIDGE WAY

City  
CUMMINGState  
GAZip Code  
30041-9359FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728556**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FAUCHER, MARK, , ,**

Mailing Address 5034 SEA DRIFT WAY

City  
SAN DIEGOState  
CAZip Code  
92154-8441FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FOSHAY ELECTRICOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729568**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FERREE, CAROLYN, R., MS.,**

Mailing Address 5147 BRANDILES LN.

City  
WINSTON SALEMState  
NCZip Code  
27104-5057FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730213**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5403 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FIELDS, CONNIE, , ,**

Mailing Address 606 E MEDUSA ST

City  
SYRACUSEState  
INZip Code  
46567-1606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730577

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FILIPSKI, DARLA, , ,**

Mailing Address 3903 PRESTON CT

City  
NORMANState  
OKZip Code  
73072-5019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730222

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FILIPSKI, DARLA, , ,**

Mailing Address 3903 PRESTON CT

City  
NORMANState  
OKZip Code  
73072-5019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1008.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730321

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

136.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5404 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FINCH, OWEN, , ,**

Mailing Address 5210 CHAMPLAIN BEND ST

City  
HOUSTONState  
TXZip Code  
77056-4206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727987

Amount of Each Receipt this Period

0.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISCHER, DAVID, , ,**

Mailing Address 11 UPLAND DR.

City  
CHAPPAQUAState  
NYZip Code  
10514-2803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOEB & LOEB LLPOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727834

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISCHER, STEPHEN, M., MR.,**

Mailing Address 17520 LAKESEEDGE TRAIL

City  
CHAGRIN FALLSState  
OHZip Code  
44023-2115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

832.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728256

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

154.35



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5405 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISHER, NANCI, R., ,**

Mailing Address 11260 TORRIE WAY,APT. A

City  
BEALETONState  
VAZip Code  
22712-7070FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.69

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728888**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISHER, PAMELA, , ,**

Mailing Address 1565 LONGS GAP RD

City  
CARLISLEState  
PAZip Code  
17013-8658FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1016.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728620**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLETCHER, DEIRDRE, , ,**

Mailing Address 913 HOLLEY LAKE RD

City  
AIKENState  
SCZip Code  
29803-2625FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

394.82

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729598**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

294.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5406 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLETCHER, LESLIE, , ,**

Mailing Address 6135 SHALEM COLONY

City  
LAS CRUCESState  
NMZip Code  
88007-5551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FFINCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.84

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729788**

Amount of Each Receipt this Period

124.92

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRAIMAN, GUIDO, , ,**

Mailing Address 135 BISCAY DR.

City  
BAL HARBOURState  
FLZip Code  
33154-1322FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.40

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729028**

Amount of Each Receipt this Period

128.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

917.57

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727984**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

258.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5407 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRANK, ANDREW, , ,**

Mailing Address 447 CHAPARRAL DR.

City  
FOLSOMState  
CAZip Code  
95630-6172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728548

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FREIDHEIM, CYRUS, F., MR., JR.**

Mailing Address 11105 OLD HARBOUR RD

City  
NORTH PALM BEACHState  
FLZip Code  
33408-3421FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728246

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRITZ, JOHN, , MR.,**

Mailing Address P.O. BOX 3115

City  
BIG BEAR LAKEState  
CAZip Code  
92315-3115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

986.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728008

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1015.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5408 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRITZ, JOHN, , MR.,

Mailing Address P.O. BOX 3115

City  
BIG BEAR LAKEState  
CAZip Code  
92315-3115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728582

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRITZ, JOHN, , MR.,

Mailing Address P.O. BOX 3115

City  
BIG BEAR LAKEState  
CAZip Code  
92315-3115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729713

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FUNK, MARK, S., MR.,

Mailing Address PO BOX 2479

City  
GARDNERVILLEState  
NVZip Code  
89410-2479FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730499

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5409 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729168**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GARCIA, KENNETH, , ,**

Mailing Address 4908 N RIVER BLVD

City  
TAMPAState  
FLZip Code  
33603-1939FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727927**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GARLICK, KAREN, , ,**

Mailing Address 6481 N. LEAD AVENUE

City  
FRESNOState  
CAZip Code  
93711-1028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

697.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728638**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

307.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5410 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GARRISON, BRUCE, D., MR.,**

Mailing Address 7 NOEL DRIVE

City  
OSSININGState  
NYZip Code  
10562-5301FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729075**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GARZARELLI, RAFAEL, J., MR.,**

Mailing Address 4235 SOUTH 500 WEST

City  
MURRAYState  
UTZip Code  
84123-1335FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIC INVESTMENTSOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729649**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GATES, BRUCE, A., MR.,**

Mailing Address P.O. BOX 143

City  
CLYDE PARKState  
MTZip Code  
59018-0143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ALTRIAOccupation (for Individual)  
SR. V.P. GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729677**

Amount of Each Receipt this Period

24300.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

24503.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5411 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GEHRING, CARL, , ,**

Mailing Address 754 PLEASANT HILL ROAD

City  
NOLANVILLEState  
TXZip Code  
76559-4512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730061**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GHEBREMEDHIN, BERHANE, , ,**

Mailing Address 1520 DOVE CY

City  
PASADENAState  
CAZip Code  
91107-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DPSS LA COUNTYOccupation (for Individual)  
ELIGIBILITY SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1270.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727708**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIBBS, CAROL, , ,**

Mailing Address 599 INDEPENDENCE AVE

City  
CHASKAState  
MNZip Code  
55318-3203FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

479.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729238**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5412 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILES, WILLIAM, Y., MR.,**Mailing Address 1400 WAVERLY RD  
APT B035City  
GLADWYNEState  
PAZip Code  
19035-1260FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PHILLIES BASEBALLOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728153**

Amount of Each Receipt this Period

495.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIORDANO, MICHAEL, , ,**

Mailing Address 59 YOWAGO AVE

City  
BRANFORDState  
CTZip Code  
06405-5526FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIORDANOOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3029.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728949**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIORDANO, MICHAEL, , ,**

Mailing Address 59 YOWAGO AVE

City  
BRANFORDState  
CTZip Code  
06405-5526FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIORDANOOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3029.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729059**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

577.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5413 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728914

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729831

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729962

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

40.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5414 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730048

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLENN, SAMUEL, , , JR.**Mailing Address 5490 ARBOR BRANCH DR.  
APT 234City  
SHALLOTTEState  
NCZip Code  
28470-6111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730329

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLENN, SAMUEL, , , JR.**Mailing Address 5490 ARBOR BRANCH DR.  
APT 234City  
SHALLOTTEState  
NCZip Code  
28470-6111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730335

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

58.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5415 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOETERS, CHARLOTTE, , ,**

Mailing Address 5122 SANDYFIELDS LANE

City  
KATYState  
TXZip Code  
77494-2329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HCCSOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728711

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOMBERG, GALINA, , ,**

Mailing Address 96 CARRICK CIR.

City  
HAYWARDState  
CAZip Code  
94542-7912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1414.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729336

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOODNOW, RUTH, G., MRS.,**

Mailing Address 1452 HESTON PL

City  
CROFTONState  
MDZip Code  
21114-2112FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730258

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5416 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729254**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729259**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORE, TRINA, , ,**

Mailing Address 14321 SOUTHWEST 20TH STREET

City  
DAVIEState  
FLZip Code  
33325-5426FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1001.42

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730344**

Amount of Each Receipt this Period

28.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

31.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5417 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAHAM, BILL, , ,**

Mailing Address 9917 EASTHAVEN BLVD

City  
HOUSTONState  
TXZip Code  
77075-3201FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728242

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREAVES, DAVID, L., MR.,**

Mailing Address 9232 SE ELDORADO WAY

City  
HOBE SOUNDState  
FLZip Code  
33455-8924FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STARR COMPANIESOccupation (for Individual)  
SR. CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730542

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREER, BETTY, , ,**

Mailing Address 10460 SILVER MAPLE AVE

City  
OXFORDState  
FLZip Code  
34484-3821FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729665

Amount of Each Receipt this Period

170.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

309.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5418 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRESLEY, ROSS, , ,**

Mailing Address 8278 CLIPPER COURT

City  
CATAWBAState  
NCZip Code  
28609-8287FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729913

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIMMER, KATHLEEN, , ,**

Mailing Address 14375 VIOLET CIR

City  
CEDAR LAKEState  
INZip Code  
46303-0776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730347

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727854

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

74.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5419 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727858

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727859

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727861

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.97

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5420 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727862**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROPPER, MAUREEN, L., ,**

Mailing Address 4876 BERRY LEAF PL

City  
HILLIARDState  
OHZip Code  
43026-3125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.52

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727868**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROUND, JIM, , ,**

Mailing Address 9791 E DREYFUS AVE

City  
SCOTTSDALEState  
AZZip Code  
85260-4450FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

937.83

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728080**

Amount of Each Receipt this Period

36.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5421 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROUND, JIM, , ,**

Mailing Address 9791 E DREYFUS AVE

City  
SCOTTSDALEState  
AZZip Code  
85260-4450FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2025

**Transaction ID : SA11A.27730004**

Amount of Each Receipt this Period

38.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROVER, KAREN, , ,**

Mailing Address 925 COLORADO ST

City  
MARSEILLESState  
ILZip Code  
61341-1241FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2025

**Transaction ID : SA11A.27728017**

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRUENDEL, LIZ, , ,**

Mailing Address 460 COUNTY ROAD 5170

City  
SALEMState  
MOZip Code  
65560-7302FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1090.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2025

**Transaction ID : SA11A.27728471**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

105.76

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5422 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRUENDEL, LIZ, , ,**

Mailing Address 460 COUNTY ROAD 5170

City  
SALEMState  
MOZip Code  
65560-7302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1090.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728517

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRUENDEL, LIZ, , ,**

Mailing Address 460 COUNTY ROAD 5170

City  
SALEMState  
MOZip Code  
65560-7302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1090.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728558

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUETZ, MICHAEL, H., MR.,**

Mailing Address 8529 E MOONLIGHT PASS

City  
SCOTTSDALEState  
AZZip Code  
85266-1375FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728534

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

347.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5423 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUM, GAYLE, , MS.,**

Mailing Address 509 VISTA CV

City  
VICTORIAState  
TXZip Code  
77904-1310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRADY BEARINGOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.18

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729974**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUM, GAYLE, , MS.,**

Mailing Address 509 VISTA CV

City  
VICTORIAState  
TXZip Code  
77904-1310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRADY BEARINGOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.18

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729979**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HALL, GERRY, D., ,**

Mailing Address PO BOX 80695

City  
AUSTINState  
TXZip Code  
78708-0695FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

370.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729747**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

154.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5424 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HALL, ROSEMARY, , ,**

Mailing Address 6532 PASILLA RD. NE

City  
RIO RANCHOState  
NMZip Code  
87144-4902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.61

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729560**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HALL, ROSEMARY, , ,**

Mailing Address 6532 PASILLA RD. NE

City  
RIO RANCHOState  
NMZip Code  
87144-4902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.61

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729570**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMBY, CAROLYN, T., MS.,**

Mailing Address 685 W KITCHEN DR.

City  
PORT NECHESState  
TXZip Code  
77651-5321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

456.04

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730554**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5425 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMLIN, DENNIS, , ,**

Mailing Address 18735 CORSINI DRIVE

City  
SAN ANTONIOState  
TXZip Code  
78258-1629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729647

Amount of Each Receipt this Period

13.01

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMM, RUTH, , ,**

Mailing Address 275 MAYO DRIVE

City  
BULLARDState  
TXZip Code  
75757-9595FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728561

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMM, RUTH, , ,**

Mailing Address 275 MAYO DRIVE

City  
BULLARDState  
TXZip Code  
75757-9595FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728674

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5426 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMMONS, JOYCE, , ,**

Mailing Address 3525 NEW DELHI DR.

City  
WINSTON SALEMState  
NCZip Code  
27101-6211FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.27

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728350**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANCOCK, THEODORA, , ,**Mailing Address 1101 S ARLINGTON RIDGE RD  
APT 1012City  
ARLINGTONState  
VAZip Code  
22202-1929FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729169**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HANCOCK, THEODORA, , ,**Mailing Address 1101 S ARLINGTON RIDGE RD  
APT 1012City  
ARLINGTONState  
VAZip Code  
22202-1929FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729178**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

219.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5427 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANSEN, JUDY, , MRS.,**

Mailing Address P.O.BOX 4213

City  
SHOW LOWState  
AZZip Code  
85902-4213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.47

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730020**

Amount of Each Receipt this Period

19.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSON, BOB, , ,**

Mailing Address 1326 HICKORYCREEK CT.

City  
WICHITAState  
KSZip Code  
67235-7000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WEIGAND OMEGA MGTOccupation (for Individual)  
PROPERTY MGT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

841.35

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729667**

Amount of Each Receipt this Period

12.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728046**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

68.79

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5428 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728067

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728070

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, LEEANN, , ,**

Mailing Address 4511 S OCEAN BLVD #403

City  
HIGHLAND BEACHState  
FLZip Code  
33487-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCA RATON FITNESSOccupation (for Individual)  
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728076

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7.20



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5429 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARTLEY, JEFFREY, , ,**

Mailing Address 2027 NAAMANS CREEK ROAD

City  
MARCUS HOOK

State  
PA

Zip Code  
19061-3343

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.46

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

**Transaction ID : SA11A.27729413**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARTWICK, GARY, , ,**

Mailing Address 2710 SYDNEY ST

City  
ROSWELL

State  
NM

Zip Code  
88201-8613

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.76

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

**Transaction ID : SA11A.27729063**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEBL, SHARON, , ,**

Mailing Address 111 E LEMON ST

City  
WEST BRANCH

State  
IA

Zip Code  
52358-1100

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.80

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

**Transaction ID : SA11A.27728567**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

154.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5430 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEFFLEBOWER, BARBARA, ANN, MS.,**

Mailing Address 4415 NEGAL CIR

City  
MELBOURNEState  
FLZip Code  
32901-8503FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728085**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEID, EDWARD, , MR., III**

Mailing Address 14615 BATAVIA DR.

City  
CENTREVILLEState  
VAZip Code  
20120-1326FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728381**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEIDT, HORACE, H., ,**

Mailing Address 14155 MAGNOLIA BL

City  
SHERMAN OAKSState  
CAZip Code  
91423-1112FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
HOUSING PROVIDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728557**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5431 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENDERSON, LEE, , ,**

Mailing Address 10291 BLACK GUM DR

City  
VANCLEAVEState  
MSZip Code  
39565-5319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.10

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730441**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENLEY, DOY, B., MR.,**

Mailing Address 14251 MIMOSA LANE

City  
TUSTINState  
CAZip Code  
92780-2334FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6843.04

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729012**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERSHBERGER, SHEILA, , ,**

Mailing Address 537 MELROSE ST.

City  
AKRONState  
OHZip Code  
44305-2813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMMUNITY BAPTIST CHURCHOccupation (for Individual)  
PASTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

730.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728720**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

649.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5432 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, RICHARD, , ,**

Mailing Address 8085 SMOKING JACKET PL

City  
LAS VEGASState  
NVZip Code  
89166-3792FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.52

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727840**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, RICHARD, , ,**

Mailing Address 8085 SMOKING JACKET PL

City  
LAS VEGASState  
NVZip Code  
89166-3792FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.52

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727989**

Amount of Each Receipt this Period

17.76

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728427**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.76

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5433 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728662**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728845**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728847**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5434 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728848**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728850**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728852**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5435 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729350**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729351**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729353**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5436 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729354

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729355

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729357

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

132.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5437 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILLMAN, DAWNA, , ,**

Mailing Address 141 SOUTH 2500 WEST

City  
HURRICANEState  
UTZip Code  
84737-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728099**

Amount of Each Receipt this Period

6.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HIPP, CHARLES, R., ,**

Mailing Address 4226 ROBERTS RD

City  
KERSHAWState  
SCZip Code  
29067-8761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729941**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIPP, CHARLES, R., ,**

Mailing Address 4226 ROBERTS RD

City  
KERSHAWState  
SCZip Code  
29067-8761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

333.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730551**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

42.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5438 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HITE, SUSAN, , ,**

Mailing Address 3290 POPLAR DR.

City  
LAWRENCEVILLEState  
GAZip Code  
30044-4131FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730494**

Amount of Each Receipt this Period

10.43

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HITE, SUSAN, , ,**

Mailing Address 3290 POPLAR DR.

City  
LAWRENCEVILLEState  
GAZip Code  
30044-4131FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730496**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HITE, SUSAN, , ,**

Mailing Address 3290 POPLAR DR.

City  
LAWRENCEVILLEState  
GAZip Code  
30044-4131FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

439.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730498**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5439 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOKE, TERRY, , ,**

Mailing Address 811 ELIZABETH ROAD

City  
SAN ANTONIOState  
TXZip Code  
78209-6138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730756

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLSTEIN, CAROLYN, , ,**

Mailing Address 11691 S RIDGEVIEW RD. APT. 303

City  
OLATHEState  
KSZip Code  
66061-6679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730041

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLMES, DON, , ,**

Mailing Address 24051 HACKBERRY CREEK CRK

City  
KATYState  
TXZip Code  
77494-2865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

402.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727957

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5440 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HORNBECK, JAMIE, , ,**

Mailing Address 1491 MARY LOUISE ROAD

City  
DE WITTState  
ARZip Code  
72042-2996FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HORNBECK GRAINOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730487**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HORST, TERESA, , MRS.,**

Mailing Address 15906 HOTCHKISS VALLEY RD E

City  
LOUDONState  
TNZip Code  
37774-6069FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727895**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HORVATH, JIM, , ,**

Mailing Address 555 EAST RIVER ROAD

City  
TUCSONState  
AZZip Code  
85704-5843FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1190.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727839**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

327.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5441 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOUSE, ANTHONY, , ,**

Mailing Address 1691 NORTH 2100 EAST ROAD

City  
STONINGTONState  
ILZip Code  
62567-5346FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729019**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOY, BARBARA, , ,**

Mailing Address 206 BRECKS LN

City  
WILMINGTONState  
DEZip Code  
19807-3011FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728595**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730491**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5442 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUBBARD, BARBARA, A., MS.,**

Mailing Address P.O. BOX 1736

City  
LAS CRUCESState  
NMZip Code  
88004-1736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.41

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2025

**Transaction ID : SA11A.27728513**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBBARD, BARBARA, A., MS.,**

Mailing Address P.O. BOX 1736

City  
LAS CRUCESState  
NMZip Code  
88004-1736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.41

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2025

**Transaction ID : SA11A.27730643**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

734.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2025

**Transaction ID : SA11A.27729146**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5443 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.49

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729148**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.49

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729153**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEYState  
ORZip Code  
97086-7830FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

734.49

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729154**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53.74

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5444 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUBEL, TERRY, , ,**

Mailing Address 11079 SOUTHEAST 104TH AVENUE

City  
HAPPY VALLEY

State  
OR

Zip Code  
97086-7830

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27729158**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUGGINS, TINA, , MS.,**

Mailing Address 3707 WIMBLEDON RD

City  
NASHVILLE

State  
TN

Zip Code  
37215-1819

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27727884**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUMPHRIES, CATHY, , ,**

Mailing Address 972 E SEA BISCUIT WAY

City  
WASHINGTON

State  
UT

Zip Code  
84780-3024

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

590.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27727886**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

124.93



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5445 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUMPHRIES, CATHY, , ,**

Mailing Address 972 E SEA BISCUIT WAY

City  
WASHINGTON

State  
UT

Zip Code  
84780-3024

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.68

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

**Transaction ID : SA11A.27727967**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUMPHRIES, CATHY, , ,**

Mailing Address 972 E SEA BISCUIT WAY

City  
WASHINGTON

State  
UT

Zip Code  
84780-3024

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.68

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

**Transaction ID : SA11A.27729109**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HYDRICK, MIKE, N., MR.,**

Mailing Address 216 E LAKE DR.

City  
BRANDON

State  
MS

Zip Code  
39047-6332

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOUTHERN STATES CONSTRUCTION

Occupation (for Individual)  
BUILDING CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

**Transaction ID : SA11A.27728287**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

107.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5446 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727842

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728219

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729505

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5447 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IRELAN, ROBERT, , ,**

Mailing Address 25 BEAR FLOWER TRAIL

City  
ARDENState  
NCZip Code  
28704-5002FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729487**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IRWIN, BEVERLY, , ,**

Mailing Address 2699 N BALD MOUNTAIN DR

City  
ALPINEState  
UTZip Code  
84004-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BIOPHARMOccupation (for Individual)  
EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727867**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACKSON, DEB, , ,**

Mailing Address 3180 PEAR ORCHARD ROAD

City  
GRANBURYState  
TXZip Code  
76048-6817FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

516.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727803**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

213.41

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5448 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACOBS, JEAN, K., ,**

Mailing Address 1141 STEAMBOAT RUN ROAD

City  
SHEPHERDSTOWNState  
WVZip Code  
25443-4132FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728347

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACOBS, MARCIA, B., MRS.,**

Mailing Address 949 BELL PLAINS RD

City  
ABILENEState  
TXZip Code  
79606-7040FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730119

Amount of Each Receipt this Period

475.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACOBS, MICHAEL, , ,**

Mailing Address 3 WHITE OAK DR.

APT C

City  
SMITHFIELDState  
NCZip Code  
27577-4872FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

502.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730264

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

516.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5449 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACOBS, MICHAEL, , ,**Mailing Address 3 WHITE OAK DR.  
APT CCity  
SMITHFIELDState  
NCZip Code  
27577-4872FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730286

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAMES, JERRY, G., MR.,**

Mailing Address 409-42 AVE.

City  
GREELEYState  
COZip Code  
80634-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
O-IOccupation (for Individual)  
MOLD TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728650

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JANSEN, WILFRED, , ,**

Mailing Address P.O. BOX 612

City  
GOLD HILLState  
ORZip Code  
97525-0612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730028

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5450 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAUDES, MARY, K., MRS.,**

Mailing Address 12657 BRADFORD WOODS DR.

City  
SAINT LOUIS

State  
MO

Zip Code  
63127-1360

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.95

Date of Receipt

02 / 27 / 2025

**Transaction ID : SA11A.27730739**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JENKINS, STEVE, , MR.,**

Mailing Address P.O. BOX 4250

City  
CAVE CREEK

State  
AZ

Zip Code  
85327-4250

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

02 / 27 / 2025

**Transaction ID : SA11A.27729216**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOBLIN, NANCY, , ,**

Mailing Address 19540 SANDRIDGE WAY

City  
LEESBURG

State  
VA

Zip Code  
20176-8286

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.55

Date of Receipt

02 / 27 / 2025

**Transaction ID : SA11A.27727670**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

166.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5451 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNER, VIVIAN, , ,**

Mailing Address 1000 S FOOTHILL DR.

City  
LAKEWOODState  
COZip Code  
80228-3405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728779**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, BERNICE, , ,**Mailing Address 55 MELROY AVE  
APT 215City  
BUFFALOState  
NYZip Code  
14218-1660FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728451**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, BERNICE, , ,**Mailing Address 55 MELROY AVE  
APT 215City  
BUFFALOState  
NYZip Code  
14218-1660FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728559**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5452 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, BERNICE, , ,**Mailing Address 55 MELROY AVE  
APT 215City  
BUFFALOState  
NYZip Code  
14218-1660FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728563**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, BERNICE, , ,**Mailing Address 55 MELROY AVE  
APT 215City  
BUFFALOState  
NYZip Code  
14218-1660FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729325**

Amount of Each Receipt this Period

4.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, BRUCE, W., ,**

Mailing Address 12216 GREY BIRCH CIR

City  
ORLANDOState  
FLZip Code  
32832-5701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728816**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.14



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5453 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, REED, , ,**

Mailing Address 460 S 2ND E

City  
SODA SPRINGSState  
IDZip Code  
83276-1671FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.88

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728168**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSTON, SANDRA, , ,**

Mailing Address 32 NEW VILLAGE LN

City  
SMYRNAState  
DEZip Code  
19977-4715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.48

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728869**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON MORTON, VALERIE, , ,**

Mailing Address 3391 EAST ORANGE BLOSSOM WAY

City  
ONTARIOState  
CAZip Code  
91761-3926FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2782.26

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727880**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.70

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5454 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON MORTON, VALERIE, , ,**

Mailing Address 3391 EAST ORANGE BLOSSOM WAY

City  
ONTARIO

State  
CA

Zip Code  
91761-3926

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2782.26

Date of Receipt

**02** / **27** / **2025**

**Transaction ID : SA11A.27727944**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, CHARLES, , ,**

Mailing Address 4 LOS ARBOLES CT.

City  
DALLAS

State  
TX

Zip Code  
75230-3052

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1486.32

Date of Receipt

**02** / **27** / **2025**

**Transaction ID : SA11A.27729364**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIX

State  
AZ

Zip Code  
85017-2534

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.29

Date of Receipt

**02** / **27** / **2025**

**Transaction ID : SA11A.27729787**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

133.13

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5455 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JONES, GERALD, , MR.,

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729790

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, GERALD, , MR.,

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729801

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JONES, GERALD, , MR.,

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729832

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

11.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5456 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729839

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729852

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729864

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5457 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729877

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729885

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, GERALD, , MR.,**

Mailing Address 5735 N 31ST AVE

City  
PHOENIXState  
AZZip Code  
85017-2534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729895

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5458 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, JANET, , ,**

Mailing Address 2401 STANFORD ROAD

City  
PANAMA CITYState  
FLZip Code  
32405-3589FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AYA HEALTHCAREOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.44

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728026**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730249**

Amount of Each Receipt this Period

36.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOYCE, RICHARD, , ,**Mailing Address 1350 E NORTH ST  
LOT 84City  
CROWN POINTState  
INZip Code  
46307-6400FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

284.31

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728464**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

39.37

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5459 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOYCE, RICHARD, , ,

Mailing Address 1350 E NORTH ST  
LOT 84City  
CROWN POINTState  
INZip Code  
46307-6400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2025

Transaction ID : SA11A.27729972

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JUSTO, EDUARDO, A., MR.,

Mailing Address 2100 NW 82ND AVE

City  
DORALState  
FLZip Code  
33122-1507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2025

Transaction ID : SA11A.27729423

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KAHN, KATHY, , ,

Mailing Address 3 CHERRYWOOD CIR

City  
WEST ORANGEState  
NJZip Code  
07052-2401FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

370.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2025

Transaction ID : SA11A.27727860

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

211.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5460 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAHN, KATHY, , ,**

Mailing Address 3 CHERRYWOOD CIR

City  
WEST ORANGEState  
NJZip Code  
07052-2401FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727871

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAHN, KATHY, , ,**

Mailing Address 3 CHERRYWOOD CIR

City  
WEST ORANGEState  
NJZip Code  
07052-2401FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727874

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAUFFMAN, CLAUDIA, , MS.,**

Mailing Address 3607 HONEYWOOD DRIVE

City  
JOHNSON CITYState  
TNZip Code  
37604-1480FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

386.65

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730271

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.41



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5461 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729157

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KENNEDY, BRUCE, , ,**

Mailing Address 11561AULDBURY WAY

City  
RALEIGHState  
NCZip Code  
27617-7847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728510

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KERR, KAT, , ,**

Mailing Address P O BOX 550989

City  
JACKSONVILLEState  
FLZip Code  
32255-0989FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTHOR SPEAKER PROPHET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

579.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727697

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

171.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5462 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KERR, KAT, , ,**

Mailing Address P O BOX 550989

City  
JACKSONVILLEState  
FLZip Code  
32255-0989FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTHOR SPEAKER PROPHET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729516**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIELY, PETER, F., MR.,**Mailing Address 8787 BAY COLONY DR.  
APT 302City  
NAPLESState  
FLZip Code  
34108-0781FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729655**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, SHERRILL, , ,**

Mailing Address 568 THORN COVE DR.

City  
CHESNEEState  
SCZip Code  
29323-8508FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727851**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5463 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KINKEAD, JUDITH, , ,**

Mailing Address 693 MONTCALM PLACE

City  
SAINT PAULState  
MNZip Code  
55116-1745FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729440**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIRKHAM, ROGER, , ,**

Mailing Address 3860 BOULDER PATCH

City  
RENOState  
NVZip Code  
89511-3261FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730066**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLAPPER, BENJAMIN, S., MR.,**

Mailing Address 40 E 80TH ST

City  
NEW YORKState  
NYZip Code  
10075-0230FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729926**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1152.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5464 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLEIN, MICHAEL, F., MR.,**

Mailing Address 5220 KLEE MILL RD S

City  
SYKESVILLEState  
MDZip Code  
21784-9257FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CHARLES A. KLEIN AND SONSOccupation (for Individual)  
MECHANICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4330.25

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729411**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNOTT, DANIEL, , ,**

Mailing Address 188 VISTA TERRAZZA ST

City  
HENDERSONState  
NVZip Code  
89011-2808FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727782**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOBES, GENE, , ,**

Mailing Address 441 DEER MEADOW BLVD

City  
CIBOLOState  
TXZip Code  
78108-3112FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.88

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728343**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

389.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5465 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727953**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOMADA, ANNA, , ,**

Mailing Address 7000 RIVER RUN BLVD

City  
SPRING HILLState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1591.63

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729597**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KONECKO, THELMA, , ,**

Mailing Address 750 CLARK COVE

City  
BUDAState  
TXZip Code  
78610-3151FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ATX BUSINESS SERVICES, INCOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729778**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5466 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOONTZ, LINDA, , ,**

Mailing Address 155 PARKLAND DR

City  
SALISBURYState  
NCZip Code  
28146-8205FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729089

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRESSGAGER, CINDY, , ,**

Mailing Address 419 CROCKETT STREET

City  
CHANNELVIEWState  
TXZip Code  
77530-4323FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730711

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUEHN, CYNTHIA, , ,**Mailing Address 12500 EDGEWATER DRIVE  
1407City  
LAKEWOODState  
OHZip Code  
44107-1656FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729217

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5467 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUHN, ROBERT, , ,**

Mailing Address 3718 LANGTRY DR

City  
AMARILLOState  
TXZip Code  
79109-3926FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728215**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUHN, ROBERT, , ,**

Mailing Address 3718 LANGTRY DR

City  
AMARILLOState  
TXZip Code  
79109-3926FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728526**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUNES, ALMA, G., ,**

Mailing Address 277 BLUEBANK RD

City  
MOREHEADState  
KYZip Code  
40351-9771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

549.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728966**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.38

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5468 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUNSTMANN, MARTIN, P., ,**

Mailing Address 10 PEETIES PATH

City  
DAMASCUSState  
PAZip Code  
18415-3636FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728239**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUNSTMANN, MARTIN, P., ,**

Mailing Address 10 PEETIES PATH

City  
DAMASCUSState  
PAZip Code  
18415-3636FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728290**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LALONDE, RICHARD , , ,**

Mailing Address 3332 NW 47TH CT

City  
OCALAState  
FLZip Code  
34482-8322FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

938.79

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730558**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.53



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5469 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAMB, LELAND, , ,**

Mailing Address 1250 COUNTRY CLUB DR.

City  
CAMANO ISLANDState  
WAZip Code  
98282-7602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727794

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAMPING, DOUG, R., MR.,**

Mailing Address 1433 SOUTH 35 EAST

City  
FARMINGTONState  
UTZip Code  
84025-2004FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UDCOccupation (for Individual)  
CO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728992

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANDESMAN, MARIA, A., MRS.,**

Mailing Address 920 PARK AVE. APT. 10A

City  
NEW YORKState  
NYZip Code  
10028-0369FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730148

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5470 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANDESMAN, MARIA, A., MRS.,**

Mailing Address 920 PARK AVE. APT. 10A

City  
NEW YORKState  
NYZip Code  
10028-0369FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.48

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730291**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANEY, RONALD, , ,**

Mailing Address 531 MAPLE DR.

City  
SUMMERVILLEState  
GAZip Code  
30747-1799FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.46

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730137**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LARSON, LARRY, , ,**

Mailing Address 916 22ND AVENUE

City  
LONGVIEWState  
WAZip Code  
98632-2246FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BHI ENERGYOccupation (for Individual)  
RADIATION TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730171**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5471 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LARUE, PATRICIA, , ,**

Mailing Address 3137-B GOLDEN YEARS HOMESTEAD DR

City  
NEW HAVENState  
INZip Code  
46774-3003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727845**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728050**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728064**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5472 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LATHAM, ROY, L., MR.,**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548-4121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.85

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728078**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAVELY, NANCY, , ,**

Mailing Address 5336 POINTE DR.

City  
EAST CHINAState  
MIZip Code  
48054-4166FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.65

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728031**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LE NORMAN, DAVID, , ,**Mailing Address 9400 BROADWAY EXT  
STE 700City  
OKLAHOMA CITYState  
OKZip Code  
73114-7444FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REIGN CAPITALOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727952**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5473 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728805

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728820

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728849

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

113.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5474 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728853**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LELEUX, DAVID, , ,**

Mailing Address 3 HEATHERSTONE DR.

City  
LAFAYETTEState  
LAZip Code  
70508-4913FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENGINEEROccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729160**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LENTZ, STEVE, , ,**

Mailing Address 3921 E OCEAN VIEW AVE

City  
NORFOLKState  
VAZip Code  
23518-1524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ANCHOR LEGALOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728325**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

287.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5475 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LENZ, SUSAN, H., MRS.,**

Mailing Address 4023 GLEN ABBY CIR

City  
STOCKTONState  
CAZip Code  
95219-1813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IACOPI & LENZOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02		27		2025

**Transaction ID : SA11A.27727866**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02		27		2025

**Transaction ID : SA11A.27727711**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOHMAN, CAROLYN, , ,**

Mailing Address 3229 WALNUT CREEK CT

City  
BRYANState  
TXZip Code  
77807-4852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

615.59

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02		27		2025

**Transaction ID : SA11A.27730049**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5476 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOWRY, FRED, L., MR., SR.**

Mailing Address 967 PIONEER RD.

City  
DRAPERState  
UTZip Code  
84020-9334FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOWRY & ASSOCIATESOccupation (for Individual)  
SMALL BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1339.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729653**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUCAS, CHARLOTTE, M., MS.,**

Mailing Address 302 N SHERIDAN ST

City  
CORONAState  
CAZip Code  
92878-4067FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LUCAS OIL PRODUCTS INCOccupation (for Individual)  
EXEC VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729220**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUDEMAN, ROGER, , ,**

Mailing Address 2291 W PARK AVE

City  
CHANDLERState  
AZZip Code  
85224-4035FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

488.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730699**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

173.75



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5477 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729437

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUNDIN, LEROY, , ,**

Mailing Address 28 CHATHAM CT

City  
CROSSVILLEState  
TNZip Code  
38558-2622FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730581

Amount of Each Receipt this Period

0.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUTSCHG, VIVIAN, , MRS.,**

Mailing Address 2400 MAPLE ST.

City  
CHADRONState  
NEZip Code  
69337-9369FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728981

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5478 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LYNCH, JEFFREY, , ,**

Mailing Address 5922 MAPLESHADE LN

City  
DALLASState  
TXZip Code  
75252-2353FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LYNCH LAW FIRMOccupation (for Individual)  
TRIAL LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727667**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACHASKEE, ALEX, , ,**

Mailing Address 25330 PENSHURST DRIVE

City  
BEACHWOODState  
OHZip Code  
44122-1384FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728191**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAHER, DENIS, , ,**

Mailing Address 202 MAIN ST

City  
NANUETState  
NYZip Code  
10954-3324FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DENMAR ELECTRICOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729025**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5479 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAHER, DENIS, , ,**

Mailing Address 202 MAIN ST

City  
NANUETState  
NYZip Code  
10954-3324FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DENMAR ELECTRICOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729859

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANCHESTER, PETER, , ,**

Mailing Address 4967 BEACON PLACE

City  
FREELANDState  
WAZip Code  
98249-9689FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729496

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728260

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

202.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5480 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANSOUR, ALFRED, A., DR.,**

Mailing Address 3771 BELLAIRE BLVD

City  
HOUSTONState  
TXZip Code  
77025-1206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ACCESS RADIOLOGYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.19

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728762**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARKS, SUSAN, , MS.,**

Mailing Address 465 N PRAIRIE DR.

City  
OCONOMOWOCState  
WIZip Code  
53066-8626FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.76

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728117**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARSH, BETH, , MRS.,**

Mailing Address 209 E PINE ST

City  
STRAFFORDState  
MOZip Code  
65757-9427FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
B. AND B. SALES CO.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727692**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5481 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARSHALL, KENNETH, , ,**

Mailing Address 2 DARBY GLEN

City  
SAN ANTONIOState  
TXZip Code  
78257-1223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729753

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, MARION, , ,**

Mailing Address 255 FIELDER LN

City  
SAVANNAHState  
TNZip Code  
38372-7026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730170

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLISState  
INZip Code  
46239-1474FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

412.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728394

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

289.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5482 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLIS

State  
IN

Zip Code  
46239-1474

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

02 / 27 / 2025

**Transaction ID : SA11A.27728682**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, SHIRLEY, , ,**

Mailing Address 9152 MELROSE CT

City  
INDIANAPOLIS

State  
IN

Zip Code  
46239-1474

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.55

Date of Receipt

02 / 27 / 2025

**Transaction ID : SA11A.27729843**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, TAMERA, , ,**

Mailing Address 1606 FM 1055

City  
DIMMITT

State  
TX

Zip Code  
79027-6207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RICHARD MARTIN & SONS

Occupation (for Individual)  
PARTS SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.07

Date of Receipt

02 / 27 / 2025

**Transaction ID : SA11A.27729954**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5483 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATHESON, MARILYN, , ,**

Mailing Address 1356 JACKSON ST

City  
BELOITState  
WIZip Code  
53511-5914FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.32

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730086**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAXWELL, TAYLOR, H., MR.,**

Mailing Address 9121 SOUTHMONT CV206

City

FORT MYERS

State

FL

Zip Code

33908-6308

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.98

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727878**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAXWELL, TAYLOR, H., MR.,**

Mailing Address 9121 SOUTHMONT CV206

City

FORT MYERS

State

FL

Zip Code

33908-6308

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.98

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728248**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5484 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAY, ANNE, , ,**

Mailing Address 8940 EDGEWOOD DR.

City  
GAITHERSBURGState  
MDZip Code  
20877-1544FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729557

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAY, ANNE, , ,**

Mailing Address 8940 EDGEWOOD DR.

City  
GAITHERSBURGState  
MDZip Code  
20877-1544FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729559

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAY, ANNE, , ,**

Mailing Address 8940 EDGEWOOD DR.

City  
GAITHERSBURGState  
MDZip Code  
20877-1544FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729565

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

46.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5485 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MC DONALD, MELODY, L., MRS.,**

Mailing Address 1098 VERNIER PLACE

City  
STANFORDState  
CAZip Code  
94305-1027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.14

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728403**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCALLUM, PAULA, , ,**

Mailing Address 113 FRANGIPANI WAY

City  
GREENVILLEState  
SCZip Code  
29609-6242FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ART GALLERY OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727798**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCANN, MIKE, , ,**

Mailing Address 7646 STRAUSSER ST NW

City  
NORTH CANTONState  
OHZip Code  
44720-5256FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728472**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.15

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5486 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCCLELLAN, REBECCA, A., MS.,

Mailing Address 12000 E. PRINCE RD.

City  
TUCSONState  
AZZip Code  
85749-9044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RAM-MAC PRODUCTSOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728504

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCFIE, MARSHALL, , DR.,

Mailing Address 4140 CHURCH HAVEN WAY

City  
ANAHEIMState  
CAZip Code  
92807-3406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728164

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCGINNIS, SCOTT, , ,

Mailing Address 45A POPPY LOOP LANE

City  
JASPERState  
ALZip Code  
35504-0007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727783

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

238.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5487 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCMULLEN, TIMOTHY, , ,**

Mailing Address 17 BAIER DR.

City  
ROCHESTERState  
NYZip Code  
14606-5311FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.36

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728535**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOAState  
NVZip Code  
89411-1548FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729213**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOAState  
NVZip Code  
89411-1548FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729215**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5488 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOAState  
NVZip Code  
89411-1548FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729218**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOAState  
NVZip Code  
89411-1548FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729219**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEEHAN, JOAN, , ,**

Mailing Address 2874 GOLDEN GATE AVE

City  
SAN FRANCISCOState  
CAZip Code  
94118-4111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1962.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729947**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5489 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728952

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728955

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEOState  
CAZip Code  
94404-3824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728956

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

14.95

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5490 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEO

State  
CA

Zip Code  
94404-3824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

**Transaction ID : SA11A.27728958**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEO

State  
CA

Zip Code  
94404-3824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

**Transaction ID : SA11A.27728961**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MENEGHELLI, CECILE, , ,**

Mailing Address 969G EDGEWATER BLVD #800

City  
SAN MATEO

State  
CA

Zip Code  
94404-3824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.88

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

**Transaction ID : SA11A.27728967**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

14.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5491 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEREDITH, RANDY, , ,**

Mailing Address 266 BULLFINCH ROAD

City  
MOORESVILLEState  
NCZip Code  
28117-5407FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1978.70

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728152**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. METZGER, AGNES, , ,**Mailing Address 888 PARK AVENUE  
2CCity  
NEW YORKState  
NYZip Code  
10075-0282FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1259.70

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729001**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. METZGER, AGNES, , ,**Mailing Address 888 PARK AVENUE  
2CCity  
NEW YORKState  
NYZip Code  
10075-0282FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1259.70

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729618**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

197.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5492 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, CLIFFORD, , ,**

Mailing Address 332 BERRYSBURG RD

City  
MILLERSBURGState  
PAZip Code  
17061-1401FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.97

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727768**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, COLLEEN, , ,**

Mailing Address 5400 LIKINI ST, APT. 303

City  
HONOLULUState  
HIZip Code  
96818-1731FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HAWAIIAN ELECTRICOccupation (for Individual)  
RATE ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.50

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728121**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728584**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.11



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5493 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MINTZ, MICHAEL, , ,**

Mailing Address 19458 WATERS REACH LN

City  
BOCA RATONState  
FLZip Code  
33434-5115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WASTE COST SOLUTIONSOccupation (for Individual)  
GARBAGE CONSULTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730476**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730205**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

695.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730208**

Amount of Each Receipt this Period

5.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

41.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5494 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.52

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730210**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.52

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730216**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MITCHELL, PERRY, , ,**

Mailing Address 4600 W PITTSBURG ST

City  
BROKEN ARROWState  
OKZip Code  
74012-5967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728182**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.54

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5495 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOHR, MARK, , MR.,

Mailing Address 1881 ASTOR DRIVE

City  
SAN LEANDROState  
CAZip Code  
94577-5306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BAYOVISTA SWIM & TENNIS CLUBOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728986

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOLENDORP, DAYTON, , MR.,

Mailing Address 6507 CASTLE KNOLL COURT

City  
INDIANAPOLISState  
INZip Code  
46250-1439FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729552

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MONTAGNA, ROBIN, , ,

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728071

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

550.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5496 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728384**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTGOMERY, ROBBIE, , ,**

Mailing Address 655 DOVER RD

City  
BENTONIAState  
MSZip Code  
39040-9024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730059**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRIS, ANJALI, , ,**

Mailing Address 863-C SAN PABLO AVENUE

City  
ALBANYState  
CAZip Code  
94706-1683FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

483.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727890**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5497 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORRICAL, PATRICIA, K., ,**

Mailing Address 5682 COUNTRY LAKES DR

City  
SARASOTAState  
FLZip Code  
34243-3811FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730443

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORTER, CLYDE, , ,**

Mailing Address 14213 WASHINGTON ST

City  
WOODSTOCKState  
ILZip Code  
60098-9464FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GUY MACHOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730449

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MULLER, DONNA, , MS.,**

Mailing Address 295 JUDD RD

City  
MILANState  
MIZip Code  
48160-9585FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730193

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5498 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, JAMES, , ,**

Mailing Address 135 SUNSHINE DR.

City  
PACIFICAState  
CAZip Code  
94044-1125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730630**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURRAY, KAREN, , ,**

Mailing Address 224 BELLE ROAD

City  
DILLWYNState  
VAZip Code  
23936-9412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728479**

Amount of Each Receipt this Period

0.20

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRELL, VAL, , ,**

Mailing Address 11605 HIGHWAY 1078

City  
FOLSOMState  
LAZip Code  
70437-3506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CLEAR CREEK STUDOccupation (for Individual)  
HORSES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730339**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

248.74

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5499 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NARANG, PAUL, JOHN, MR.,**

Mailing Address 8450 82ND STREET  
APT 110

City  
PLEASANT PRAIRIE

State  
WI

Zip Code  
53158-2536

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DELOITTE

Occupation (for Individual)  
INFORMATION TECHNOLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27728602**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NARANG, PAUL, JOHN, MR.,**

Mailing Address 8450 82ND STREET  
APT 110

City  
PLEASANT PRAIRIE

State  
WI

Zip Code  
53158-2536

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DELOITTE

Occupation (for Individual)  
INFORMATION TECHNOLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27728651**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEEDHAM, DEBBIE, , ,**

Mailing Address 590 COUNTRY CLUB DR.

City  
NEW CANEY

State  
TX

Zip Code  
77357-3112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NEW CANEY ISD

Occupation (for Individual)  
CHILD NUTRITION DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

241.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27727701**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

81.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5500 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEIBERT, JOYCE, , ,**

Mailing Address 1992 W STARE ROAD 14

City  
MOROCCO

State  
IN

Zip Code  
47963-8214

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.94

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

**Transaction ID : SA11A.27729379**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEIBERT, JOYCE, , ,**

Mailing Address 1992 W STARE ROAD 14

City  
MOROCCO

State  
IN

Zip Code  
47963-8214

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.94

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

**Transaction ID : SA11A.27729510**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEIBERT, JOYCE, , ,**

Mailing Address 1992 W STARE ROAD 14

City  
MOROCCO

State  
IN

Zip Code  
47963-8214

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.94

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

**Transaction ID : SA11A.27729515**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

149.50



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5501 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEIBERT, JOYCE, , ,**

Mailing Address 1992 W STARE ROAD 14

City  
MOROCCOState  
INZip Code  
47963-8214FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.94

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729531**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, EDWARD, , ,**

Mailing Address 8830 MCAVOY DR.

City  
HOUSTONState  
TXZip Code  
77074-7310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.08

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730519**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, EDWARD, , ,**

Mailing Address 8830 MCAVOY DR.

City  
HOUSTONState  
TXZip Code  
77074-7310FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.08

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730520**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5502 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, MIKE, G., ,**

Mailing Address 711 E 3230 N

City  
LEHIState  
UTZip Code  
84043-2910FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729935**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEWMAN, DENNIS, , MR.,**

Mailing Address 2500 STAFFORD RD

City

THOUSAND OAKS

State

CA

Zip Code

91361-5074

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.51

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729057**

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NICHOLS, PHIL, , ,**

Mailing Address 407 WEST CORNELL STREET

City

AVON PARK

State

FL

Zip Code

33825-3700

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1266.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728268**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

644.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5503 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOGARA, CLEOPATRA, , ,**

Mailing Address 855 DONALD ST

City  
SONOMAState  
CAZip Code  
95476-4608FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727814**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOLTE, RICK, , ,**

Mailing Address 4084 THE FENWAY

City  
MULBERRYState  
FLZip Code  
33860-8618FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728162**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NORRIS, DANIEL, , ,**

Mailing Address 22680 CEDAR LANE CT. APT. 3408

City  
LEONARDTOWNState  
MDZip Code  
20650-3933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

363.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729735**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

142.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5504 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

589.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729637**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O'FLYNN, ARMINDA, , ,**

Mailing Address 12864 BISCAYNE BLVD

City  
N. MIAMIState  
FLZip Code  
33181-2007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

992.53

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729869**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'PRY, FREDDY, , ,**

Mailing Address 1622 DEERFIELD COURT

City  
RICHMONDState  
TXZip Code  
77406-6507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RECREATIONAL WATER TREATMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730014**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5505 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OAK, ALAN, , MR.,**

Mailing Address 5104 BONHAM RD

City  
OXFORDState  
OHZip Code  
45056-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728204**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OAK, ALAN, , MR.,**

Mailing Address 5104 BONHAM RD

City  
OXFORDState  
OHZip Code  
45056-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728230**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OAK, ALAN, , MR.,**

Mailing Address 5104 BONHAM RD

City  
OXFORDState  
OHZip Code  
45056-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

471.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728274**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5506 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLSON, PATRICIA, , ,**

Mailing Address 243 OCEANO DRIVE

City  
LOS ANGELESState  
CAZip Code  
90049-4123FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730721**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OPDYCKE, NICOLA, , ,**

Mailing Address 2202 MIRAMONTE WAY

City  
NAPLESState  
FLZip Code  
34105-3074FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730043**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLEState  
TNZip Code  
37205-2700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728710**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.53

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5507 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27728717**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAGE, CHERYL, L., MS.,**

Mailing Address 13 PIPESTONE DR.

City  
MIAMISBURG

State  
OH

Zip Code  
45342-6603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MIAMI VALLEY HOSPITAL

Occupation (for Individual)  
NURSE/RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27730407**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PALERMO, MARK, , ,**

Mailing Address 246 GARFIELD PL

City  
BROOKLYN

State  
NY

Zip Code  
11215-2207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
LAWYER, INVESTOR, CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

748.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

**Transaction ID : SA11A.27729575**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5508 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALERMINO, RONALD, , ,**

Mailing Address 64 COUNTY LINE ROAD

City  
AMITYVILLEState  
NYZip Code  
11701-3121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729838

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PALMER, JEAN, B., MRS.,**

Mailing Address 224 ARNOLD AVE

City  
SYRACUSEState  
NYZip Code  
13210-3714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727991

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PALMER, JEAN, B., MRS.,**

Mailing Address 224 ARNOLD AVE

City  
SYRACUSEState  
NYZip Code  
13210-3714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728916

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.62



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5509 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARIKH, AVANI, , ,**

Mailing Address 200 EAST 69TH STREET

City  
NEW YORKState  
NYZip Code  
10021-5748FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729870**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARKS, JENNIE, , ,**

Mailing Address 386 W TROXELL RD

City  
OAK HARBORState  
WAZip Code  
98277-7909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728469**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKS, JENNIE, , ,**

Mailing Address 386 W TROXELL RD

City  
OAK HARBORState  
WAZip Code  
98277-7909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

521.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729193**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5510 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARSONS, DENISE, , ,**

Mailing Address 1324 COUNTY ROAD 225

City  
BLUFFTONState  
TXZip Code  
78607-3008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728642

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729766

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729769

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

79.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5511 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729780**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729784**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARTHE, GERALDINE, M., ,**

Mailing Address 10 SYLVAN LN.

City  
MILLER PLACEState  
NYZip Code  
11764-1535FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729793**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5512 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728778**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728803**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PEARSON, FRANCES, TAYLOR, MRS.,**

Mailing Address 1940 MAYFLOWER DR.

City  
DALLASState  
TXZip Code  
75208-3113FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MUSIC TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

243.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729119**

Amount of Each Receipt this Period

21.78

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5513 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PELC, ANTOINETTE, , ,**

Mailing Address 650 15TH AVENUE SOUTH

City  
NAPLESState  
FLZip Code  
34102-7441FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PELCONCEPTS INCOccupation (for Individual)  
DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728585**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PEREIRA, REGINALD, , ,**Mailing Address 10201 E BAY HARBOR DR.  
APT 503

City

BAY HARBOR ISLANDS

State

FL

Zip Code

33154-1305

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PPSFOccupation (for Individual)  
MEDICAL DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730322**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERRIN, CAROL, , MRS.,**

Mailing Address 16 ROCKY COVE RD

City

LEXINGTON

State

SC

Zip Code

29072-9763

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

921.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728639**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5514 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETITJEAN, SANDRA, , ,**

Mailing Address 6832 TAMARA LANE

City  
ASSARIAState  
KSZip Code  
67416-8875FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728807

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETITJEAN, SANDRA, , ,**

Mailing Address 6832 TAMARA LANE

City  
ASSARIAState  
KSZip Code  
67416-8875FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730732

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730401

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

26.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5515 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIERCE, ARLENE, , ,**

Mailing Address 4931 ELMGATE DR.

City  
ORCHARD LAKEState  
MIZip Code  
48324-3012FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729058**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIETTE, LYSSA, , ,**

Mailing Address 118 EAST ERIE STREET 23A

City  
CHICAGOState  
ILZip Code  
60611-5151FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729808**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIETTE, LYSSA, , ,**

Mailing Address 118 EAST ERIE STREET 23A

City  
CHICAGOState  
ILZip Code  
60611-5151FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

740.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729810**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

70.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5516 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729045**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729348**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POLLARD, ANN, , ,**

Mailing Address 13 INDIGO DR

City  
LAKE PLACIDState  
FLZip Code  
33852-6177FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728597**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.24



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5517 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POTTER, WILLIAM, , ,**

Mailing Address 95 GREENHORN RD

City  
HAILEYState  
IDZip Code  
83333-5108FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729297

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POWELL, DOUG, , ,**

Mailing Address 14461 BROOK HOLLOW RD

City

SUMMERDALE

State

AL

Zip Code

36580-4211

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729874

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POWELL, THOMAS, , MR.,**

Mailing Address P.O. BOX 300

City

GIDDINGS

State

TX

Zip Code

78942-0300

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

364.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729170

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

399.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5518 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POZZI, ROBERT, J., ,**

Mailing Address 3733 FALSTONE ROAD

City  
RICHMONDState  
VAZip Code  
23234-3769FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727855**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRATT, BRENDA, , ,**

Mailing Address 2312 HICKORY RIDGE DRIVE

City  
BOSSIER CITYState  
LAZip Code  
71111-5513FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729248**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRESTON, BRADLEY, B., MR.,**

Mailing Address 2109 SOMMER ST

City  
NAPAState  
CAZip Code  
94559-4306FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

349.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728110**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5519 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PURAM, VIJAYA, , ,**

Mailing Address 18027 COZUMEL ISLE DRIVE

City  
TAMPAState  
FLZip Code  
33647-3374FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727917

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUINTANA, VIRGINIA, , MRS.,**

Mailing Address 6601 RANCHO SANTA FE DR.

City

LAS VEGAS

State

NV

Zip Code

89130-1725

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1622.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728962

Amount of Each Receipt this Period

23.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City

METAMORA

State

IL

Zip Code

61548-7561

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730053

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5520 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730055**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730060**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAYBORN, KENNETH, , ,**

Mailing Address 507 KYLE LANE NW

City  
CLEVELANDState  
TNZip Code  
37312-6439FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1059.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729588**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5521 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REAGAN, RONALD, C., ,**

Mailing Address 1783 FOUR MILE COVE PKWY

City  
CAPE CORALState  
FLZip Code  
33990-2409FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728324**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REDDINGTON, IVAN, L., ,**

Mailing Address 6432 HIGHLANDS IN THE WOODS ST

City  
LAKELANDState  
FLZip Code  
33813-3814FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727972**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REHME, MARK, , ,**

Mailing Address 1449 CR 1590

City  
MARLOWState  
OKZip Code  
73055-6404FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729558**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

233.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5522 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICCIUTI, LOU RAE, , ,**

Mailing Address 12107 KAMMERER AVENUE

City  
CONNEAUT LAKEState  
PAZip Code  
16316-3941FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.98

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729779**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728236**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730492**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

18.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5523 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728985**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728988**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBERTS, LINDA, , ,**

Mailing Address 5610 W ORLANDO CIRCLE

City  
BROKEN ARROWState  
OKZip Code  
74011-1159FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729566**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5524 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, HAZEL, , ,**

Mailing Address 1333 LEE ROAD 312

City  
SMITHS STATIONState  
ALZip Code  
36877-3195FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729690**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728755**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730650**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.95



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5525 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBY, JUDD, , ,**

Mailing Address 5048 TUXEDO BLVD

City  
MOUNDState  
MNZip Code  
55364-9254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728653

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROESBERY, ROBERT, , ,**Mailing Address 272 PARKWAY AVE  
APT 3City  
CINCINNATIState  
OHZip Code  
45216-1476FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727891

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, CLAUDETTE, C., MS.,**

Mailing Address 24290 HATTERAS ST

City  
WOODLAND HILLSState  
CAZip Code  
91367-3937FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729601

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

356.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5526 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730230

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSIN-SMALLEY, DEBORAH, A., ,**

Mailing Address 5 BIRCHWOOD PL

City  
SOUTH RIVERState  
NJZip Code  
08882-1908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729872

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728661

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5527 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUSSI, FREDERICK, , ,**

Mailing Address 1041 EL MIRADOR DRIVE

City  
FULLERTONState  
CAZip Code  
92835-1912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FRPEPES RESTAURANTS INC.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.02

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728677**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUTHER, PATRICIA, M., ,**

Mailing Address 300 CHURCH ST

City  
MATAWANState  
NJZip Code  
07747-1522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.54

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728619**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUTTER, JOSEPH, G., MR., USAF RET**

Mailing Address 2250 GOVERNORS BEND RD SE

City  
HUNTSVILLEState  
ALZip Code  
35801-1371FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

422.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728032**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5528 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SADAR, AMELIA, , MS.,**

Mailing Address 1604STONE MANSION DR.

City  
SEWICKLEYState  
PAZip Code  
15143-8601FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729612**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SARAZIN, KATHERINE, , ,**Mailing Address 14252 VENTURA BLVD  
1City  
SHERMAN OAKSState  
CAZip Code  
91423-2789FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SARAZINOccupation (for Individual)  
HAIR DESIGNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728326**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAULSBERRY, GAREN, , ,**

Mailing Address 4440 LONESOME PINE ROAD

City  
LAS CRUCESState  
NMZip Code  
88007-4566FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PERATONOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729706**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5529 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAULSBERRY, GAREN, , ,**

Mailing Address 4440 LONESOME PINE ROAD

City  
LAS CRUCESState  
NMZip Code  
88007-4566FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PERATONOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729718**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHAAB, JANICE, , ,**

Mailing Address 560 WOODINGTON DRIVE

City  
LANCASTERState  
CAZip Code  
93535-3808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729683**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHAFFNIT, WAYNE, , ,**

Mailing Address 340 DUNCAN ST

City  
SAN FRANCISCOState  
CAZip Code  
94131-2022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

357.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728790**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5530 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHILDWACHTER, FRED, , ,**

Mailing Address 34 MAPLEWOOD DR

City  
DANBURYState  
CTZip Code  
06811-4211FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728424**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHILDKNECHT, RAINER, F., MR.,**

Mailing Address 211 WOODLAWN AVE

City  
WINNETKAState  
ILZip Code  
60093-1552FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727816**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHIPPER, GERRIT, , ,**

Mailing Address 2344 DIXON RD

City  
FREDERICKState  
MDZip Code  
21704-8131FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CWCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729540**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5531 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHIPPER, HAROLD, S., MR., JR.**

Mailing Address 1450 NORTH RHODE ISLAND AVENUE

City  
MASON CITYState  
IAZip Code  
50401-1446FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.86

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

Transaction ID : SA11A.27727704

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHLOUGH, JAMES, , ,**

Mailing Address 3810 CHURCH HILL

City  
CRYSTAL LAKEState  
ILZip Code  
60014-6511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.20

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

Transaction ID : SA11A.27730104

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHWARZ, GENE, , ,**

Mailing Address 521 8TH AVE NW

City  
WASECAState  
MNZip Code  
56093-2335FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025

Transaction ID : SA11A.27727801

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

108.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5532 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SERBIA, VICTORIA, C., ,**

Mailing Address 4304 HORACE DR. NW

City  
HUNTSVILLEState  
ALZip Code  
35816-3518FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730683**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHAFFER, JOHN, , ,**

Mailing Address 267 NEWPORT NEWS AVE

City  
HAMPTONState  
VAZip Code  
23669-4146FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729737**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHALLER, NELSON, , ,**

Mailing Address 17898 ABERDEEN WAY

City  
BOCA RATONState  
FLZip Code  
33496-1411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2568.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730518**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1071.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5533 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHEDLOCK, JOHN, , ,**

Mailing Address 10089 IRON MOUNTAIN CT

City  
RANCHO CUCAMONGAState  
CAZip Code  
91737-6831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728224**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHINKLE, RUSSELL, , ,**

Mailing Address 9350 ETON AVE

City  
CHATSWORTHState  
CAZip Code  
91311-5809FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728824**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHIRAR, NANCY, , ,**

Mailing Address 3611 HOGGE DR.

City  
ALLENState  
TXZip Code  
75002-6733FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729603**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5534 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOEMAKE, JAMES, , ,**

Mailing Address 3202 ROBINSON ROAD

City  
MISSOURI CITYState  
TXZip Code  
77459-3234FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730129**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOUSE, JERROLD, R., MR.,**

Mailing Address 2555 SOUTH 9TH AVENUE

City  
SAFFORDState  
AZZip Code  
85546-3630FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730755**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIGMOND, ERIC, , ,**

Mailing Address 3010 3RD ST. NW

City  
SIDNEYState  
MTZip Code  
59270-5902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SIDNEY HEALTH CENTEROccupation (for Individual)  
ORTHOPAEDIC SURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

506.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729729**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

253.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5535 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIWIK, DEBORAH, , ,**

Mailing Address 1750 5TH STREET DR. NW

City  
HICKORYState  
NCZip Code  
28601-5206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729668**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SKIDMORE, MARGARET, , ,**

Mailing Address 3209 EAST LARK STREET

City  
SPRINGFIELDState  
MOZip Code  
65804-6686FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730609**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLOTTERBECK, SCOTT, F., MR.,**

Mailing Address 9034 RAWHIDE WAY

City  
SACRAMENTOState  
CAZip Code  
95826-2113FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SOUND MIXER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729456**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5536 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMALLWOOD, MARJORIE, , MS.,**

Mailing Address 2315 ATTALA ROAD 3121

City  
VAIDENState  
MSZip Code  
39176-9549FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729079**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, ELIZABETH, , ,**

Mailing Address 1709 INDIAN WELLS AVE

City  
OCALAState  
FLZip Code  
34472-8401FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730241**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, JENNIFER, , ,**

Mailing Address 1210 W STONE MEADOW WAY

City  
SPRINGFIELDState  
MOZip Code  
65810-1609FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COX HEALTHOccupation (for Individual)  
PEDIATRIC NURSE PRACTITIONER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728466**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5537 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, MARY, L., ,**

Mailing Address 2939 QUENLEY ST

City  
SAINT CHARLESState  
MOZip Code  
63301-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727690

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, MARY, L., ,**

Mailing Address 2939 QUENLEY ST

City  
SAINT CHARLESState  
MOZip Code  
63301-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729682

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, MARY, L., ,**

Mailing Address 2939 QUENLEY ST

City  
SAINT CHARLESState  
MOZip Code  
63301-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

324.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730714

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5538 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, TOM, R., MR.,**

Mailing Address 1125 MARK PLACE, NW

City  
KENNESAWState  
GAZip Code  
30144-6301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729044

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, VICKI, , ,**

Mailing Address 339 HUFFAKER ROAD

City  
ANDERSONState  
MOZip Code  
64831-9895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729726

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SNEARLY, MARTHA, D., MS.,**

Mailing Address 8055 TWIN OAKS DR

City  
BROADVIEW HEIGHTSState  
OHZip Code  
44147-1035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1639.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729239

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.01

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5539 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNOWDEN, JAMES, , MR., III**

Mailing Address 4033 TAMWORTH RD

City  
FORT WORTHState  
TXZip Code  
76116-7337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1694.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729592**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLEANICOV, PAVEL, A., MR.,**

Mailing Address 711 MEADOW CREST DRIVE

City  
ROCKTONState  
ILZip Code  
61072-8000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730056**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730268**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5540 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPAETH, EDMUND, , ,**

Mailing Address 26536 LOVE LN

City  
RAMONAState  
CAZip Code  
92065-4822FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729824

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPAETH, EDMUND, , ,**

Mailing Address 26536 LOVE LN

City  
RAMONAState  
CAZip Code  
92065-4822FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729837

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729792

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5541 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPECHT, VIVIAN, , ,**

Mailing Address PO BOX 63

City  
LYMANState  
NEZip Code  
69352-0063FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727812**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City

BALL GROUND

State

GA

Zip Code

30107-2716

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729241**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEAD, LINDA, , ,**

Mailing Address 1460 OLD NELSON RD

City

BALL GROUND

State

GA

Zip Code

30107-2716

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

776.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730715**

Amount of Each Receipt this Period

1.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

21.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5542 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEPHENS, RANDY, P., MR.,**

Mailing Address 250 CR 416

City  
COMANCHEState  
TXZip Code  
76442-4639FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SUREGROW AG PRODUCTSOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.16

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728131**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729660**

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, KENNETH, M., MR.,**

Mailing Address 306 PLYMOUTH ROCK CT.

City  
MADISONState  
TNZip Code  
37115-5927FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.47

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729661**

Amount of Each Receipt this Period

0.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5543 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STODDARD, LYNDA, C., MS.,**

Mailing Address 208 SPYGLASS LN

City  
JUPITERState  
FLZip Code  
33477-4091FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

**Transaction ID : SA11A.27728670**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOKES, NORMA, T., MRS.,**

Mailing Address 34 CHESTNUT RIDGE DR.

City  
INMANState  
SCZip Code  
29349-4517FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

**Transaction ID : SA11A.27728937**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOKES, NORMA, T., MRS.,**

Mailing Address 34 CHESTNUT RIDGE DR.

City  
INMANState  
SCZip Code  
29349-4517FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

**Transaction ID : SA11A.27730761**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5544 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STONER, BEVERLY, , ,**

Mailing Address 624 E PRAIRIE ST.

City  
LANARKState  
ILZip Code  
61046-1340FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.30

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727920**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRECKER, GARY, , ,**

Mailing Address 8007 WHITE OAK AVE

City  
RESEDAState  
CAZip Code  
91335-1534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.21

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729857**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STUBBLEFIELD, DOTTIE, , ,**

Mailing Address 1265 CHARTRES

City  
KAUFMANState  
TXZip Code  
75142-4473FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

328.98

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729685**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5545 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STUMPF, JOHN, , ,**

Mailing Address 2557 SOUTH AVENUE

City  
WAPPINGERS FALLSState  
NYZip Code  
12590-7710FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730161**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STURGILL, LARRY, , ,**

Mailing Address 2100 WEST KING ROAD

City  
KUNAState  
IDZip Code  
83634-1751FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.79

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730754**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728679**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

147.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5546 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUTAY, CAROL, , ,**

Mailing Address 9327 CYPRESS BEND DR.

City  
TAMPAState  
FLZip Code  
33647-2553FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729846**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SWIERS, THOMAS, , ,**

Mailing Address 1161 RANDOLPH RD

City  
MCLEANState  
VAZip Code  
22101-2961FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US GOVTOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729920**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAFFINDER, JANIECE, A., MS.,**

Mailing Address 3504 DRY BROOK CROSSING

City  
PFLUGERVILLEState  
TXZip Code  
78660-5581FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729287**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

138.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5547 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TALLEY, RICHARD, , ,**Mailing Address 2777 PARADISE RD  
3606City  
LAS VEGASState  
NVZip Code  
89109-9126FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730110**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, BOBBY, L., MR.,**

Mailing Address 1921 MONTERREY ST

City  
ALLENState  
TXZip Code  
75013-6133FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RYDEROccupation (for Individual)  
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728751**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, PEGGY, , ,**

Mailing Address 13320 NEW DELAWARE ROAD

City  
MOUNT VERNONState  
OHZip Code  
43050-9138FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730540**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5548 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, PEGGY, , ,**

Mailing Address 13320 NEW DELAWARE ROAD

City  
MOUNT VERNONState  
OHZip Code  
43050-9138FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730546**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMAS, LAUREL, , ,**

Mailing Address 1450FM3006

City  
PLEASANTONState  
TXZip Code  
78064-6748FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729054**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THURMAN, MATT, , MR.,**

Mailing Address 10350 LEHMAN RD

City  
ORLANDOState  
FLZip Code  
32825-6650FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728217**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

143.30



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5549 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRAN, TUAN, , ,**

Mailing Address 9041 GREENVILL AVE.

City  
WESTMINSTERState  
CAZip Code  
92683-5514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IHSSOccupation (for Individual)  
PRAYER; WORKER; WRITER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729467**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TROYER, DENNIS, , ,**

Mailing Address 2192 GLEN COVE WAY

City  
HIGH POINTState  
NCZip Code  
27265-9445FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.75

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729369**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TURNER, CLAUDA, , ,**

Mailing Address 3501 FM 585

City  
BANGSState  
TXZip Code  
76823-4045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729723**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5550 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ULZHEIMER, BOB, , ,**

Mailing Address 4011 GUNNIN ROAD

City  
NORCROSSState  
GAZip Code  
30092-1949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730459

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. UMBARGER, BRENDA, L., ,**

Mailing Address P.O. BOX 1774

City  
FRITCHState  
TXZip Code  
79036-1774FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729509

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN DE POL, HENDRIK, , MR.,**

Mailing Address 2225 LIVINGSTON LN

City  
STOCKTONState  
CAZip Code  
95210-3626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

352.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728207

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

39.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5551 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN DE POL, HENDRIK, , MR.,**

Mailing Address 2225 LIVINGSTON LN

City  
STOCKTONState  
CAZip Code  
95210-3626FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.88

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729435**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728706**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.29

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729455**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5552 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729593**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730246**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.29

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730382**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

14.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5553 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VANVALKENBURG, ANN, , ,**

Mailing Address P.O. BOX 1124

City  
PUEBLOState  
COZip Code  
81002-1124FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ANESTHESIA PAIN MANAGEMENTOccupation (for Individual)  
NURSE ANESTHETIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727877**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAWTER, STEVE, , ,**

Mailing Address 1701 CATALINA AVE

City  
SEAL BEACHState  
CAZip Code  
90740-5710FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.15

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728155**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VERPLANCK, JAMES, S., MR.,**

Mailing Address 3525 BRIDGEFIELD DR.

City  
LAKELANDState  
FLZip Code  
33803-5912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.95

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730215**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5554 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VIADA, MARIA, , ,**

Mailing Address 1271 AVENUE DU CHATEAU

City  
COVINGTONState  
LAZip Code  
70433-6424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.19

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730032**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VIADA, MARIA, , ,**

Mailing Address 1271 AVENUE DU CHATEAU

City  
COVINGTONState  
LAZip Code  
70433-6424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.19

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730037**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VITALE, TED, , ,**

Mailing Address 97529 FRANKLIN RIDGE

City  
CHAPEL HILLState  
NCZip Code  
27517-8319FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NASAOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

990.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729525**

Amount of Each Receipt this Period

495.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

515.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5555 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VO, HONG, , ,**

Mailing Address 762 KAUFMANN COURT

City  
SAN JOSEState  
CAZip Code  
95116-3254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLOBAL BUSINESS SOLUTIONS LLCOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730747

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WADE, DWIGHT, , ,**

Mailing Address 416 KINGSTON PARK DR.

City  
KNOXVILLEState  
TNZip Code  
37919-6680FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728378

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAHMAN, GERALD, , ,**

Mailing Address PO BOX 789

City  
ALMAState  
ARZip Code  
72921-0789FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

577.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730317

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

68.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5556 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALDORF, RAYMOND, , ,**

Mailing Address 1428 INDIANA AVENUE

City  
SOUTH PASADENAState  
CAZip Code  
91030-4110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.74

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729105**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALLACE, DEBRA, , ,**

Mailing Address P.O. BOX 197

City  
MIDLANDState  
TXZip Code  
79702-0197FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27728463**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WARD, THOMAS, , ,**

Mailing Address 11224 DELMAR STREET

City  
LEAWOODState  
KSZip Code  
66211-1332FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.50

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729582**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

197.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5557 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BRISTOL MYERS SQUIBB

Occupation (for Individual)

COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727787

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATT, CAROL, , ,**

Mailing Address 1470 RHODE ISLAND ST.

City

LOVELAND

State

CO

Zip Code

80538-6831

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27727924

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAY, REED, , ,**

Mailing Address 2801 BRASHER LANE

City

BEDFORD

State

TX

Zip Code

76021-5285

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CLASSIC BLIND

Occupation (for Individual)

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729389

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5558 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WAY, REED, , ,**

Mailing Address 2801 BRASHER LANE

City  
BEDFORDState  
TXZip Code  
76021-5285FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CLASSIC BLINDOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729934**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEATHERLY, CINDI, , ,**

Mailing Address 4690 MEADOW SPRINGS DRIVE

City  
WATKINSVILLEState  
GAZip Code  
30677-4642FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729464**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEATHERLY, CINDI, , ,**

Mailing Address 4690 MEADOW SPRINGS DRIVE

City  
WATKINSVILLEState  
GAZip Code  
30677-4642FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

394.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729652**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5559 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEHMAN, JOAN, , ,**

Mailing Address 831 HICKORY KNOB CIRCLE

City  
CEDAR HILLState  
TXZip Code  
75104-7803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1670.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729430

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WELCH, GARY, , ,**

Mailing Address 3349 AN COUNTY RD 463

City  
MONTALBAState  
TXZip Code  
75853-2933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728249

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELTON, DEBRA, , ,**Mailing Address 1522 E BROADWAY  
APT DCity  
MOUNT VERNONState  
WAZip Code  
98274-4513FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27728047

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

128.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5560 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEST, THERESA, , ,**

Mailing Address 148 MAPLE CV

City  
ONALASKAState  
TXZip Code  
77360-7016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729797**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728889**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WESTFALL, ANNE, , ,**

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIAState  
WAZip Code  
98531-8894FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

479.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729387**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5561 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WESTFALL, ANNE, , ,**

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIAState  
WAZip Code  
98531-8894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729433

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITT, DANIEL, , ,**

Mailing Address 1045 VAN NUYS STREET

City  
SAN DIEGOState  
CAZip Code  
92109-1208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730006

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITT, DANIEL, , ,**

Mailing Address 1045 VAN NUYS STREET

City  
SAN DIEGOState  
CAZip Code  
92109-1208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730236

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

166.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5562 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WICKLINE, RICHARD, , ,**Mailing Address 1125 MCGEE CT NE  
UNIT 372City  
SALEMState  
ORZip Code  
97303-9469FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727728**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WICKLINE, RICHARD, , ,**Mailing Address 1125 MCGEE CT NE  
UNIT 372City  
SALEMState  
ORZip Code  
97303-9469FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727788**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIEL, CAROL, L., MS.,**

Mailing Address 6017 SUNRISE CIR

City  
FRANKLINState  
TNZip Code  
37067-8238FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

371.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728579**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.63

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5563 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILKINS, BELINDA, , ,**

Mailing Address 1105 RATLIFF ST

City  
OZONAState  
TXZip Code  
76943-4455FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.04

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727919**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, CATHERINE, L., ,**

Mailing Address PO BOX 127

City  
SCHERTZState  
TXZip Code  
78154-0127FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.42

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727789**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMS, JIMMY, O., MR.,**

Mailing Address 1075 MOTORCOACH DR

City  
POLK CITYState  
FLZip Code  
33868-5113FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

379.45

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27730173**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5564 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, DONNA, , ,**

Mailing Address 3829 BALSAM ROAD

City  
PORT REPUBLICState  
MDZip Code  
20676-2642FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729111**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, JEAN, , ,**

Mailing Address 5644 ARAL DRIVE

City  
LAKELANDState  
FLZip Code  
33805-9615FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730167**

Amount of Each Receipt this Period

3.96

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOLFF, WENDY, W., MS.,**

Mailing Address 20425 ROCA CHICA DRIVE

City  
MALIBUState  
CAZip Code  
90265-5331FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728447**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

514.21



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5565 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODHOUSE, MARILYN, M., MRS.,**

Mailing Address 650 RAMBLEWOOD RD.

City  
HOUSTONState  
TXZip Code  
77079-6905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2197.50

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27727985**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729289**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA11A.27729292**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

269.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5566 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729294

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729296

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729891

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5567 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729896

Amount of Each Receipt this Period

1.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODS, BARB, , ,**

Mailing Address 615 LILAC WAY

City  
LOMBARDState  
ILZip Code  
60148-3638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27729899

Amount of Each Receipt this Period

0.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODS, ELYSE, , MS.,**

Mailing Address 25341 CORTE SOMBRERO

City  
MURRIETAState  
CAZip Code  
92563-5230FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025

Transaction ID : SA11A.27730688

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

79.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5568 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, CAROLYN, , ,**

Mailing Address 30 LISA AVE

City  
POPLAR BLUFFState  
MOZip Code  
63901-9094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727686**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, CAROLYN, , ,**

Mailing Address 30 LISA AVE

City  
POPLAR BLUFFState  
MOZip Code  
63901-9094FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728141**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, MARY, H., MR.,**

Mailing Address 300 BELL MEADE DR.

City  
EADSState  
TNZip Code  
38028-3524FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

357.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729955**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5569 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WULF, JAMES, , ,**Mailing Address 19300 HIGHWAY 17  
LOT 7City  
WAYNESVILLEState  
MOZip Code  
65583-3392FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729774**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27728760**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YANCEY, JO ANN, , ,**

Mailing Address 14170 F M 2854 ROAD

City  
CONROEState  
TXZip Code  
77304-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7402.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27729823**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5570 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YATES, SYLVIA, , ,**

Mailing Address 4107 N ALABAMA ST

City  
LOXLEYState  
ALZip Code  
36551-4533FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27727983**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNG, PATRICIA, , ,**

Mailing Address 9940 PREMIERE VIEW CIR

City  
HAGERSTOWNState  
MDZip Code  
21740-8904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11A.27730524**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5176326.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11C.27731506**

Amount of Each Receipt this Period

190867.72

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5571 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABERNATHY, MICHAEL, , ,**

Mailing Address 1530 FOOTHILL COURT

City  
WHEATONState  
ILZip Code  
60189-7336FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MORGAN LEWISOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732185**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABERNATHY, MICHAEL, , ,**

Mailing Address 1530 FOOTHILL COURT

City  
WHEATONState  
ILZip Code  
60189-7336FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MORGAN LEWISOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733125**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMS, PETER, , DR.,**

Mailing Address 55 1ST STREET UNIT 206

City  
PELHAMState  
NYZip Code  
10803-1457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

599.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735411**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

304.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5572 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AGUILERA, ROBERT, A., MR.,**

Mailing Address 8185 BENEVENTO DR

City  
EL DORADO HILLSState  
CAZip Code  
95762-6217FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.96

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732989**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AGUILERA, ROBERT, A., MR.,**

Mailing Address 8185 BENEVENTO DR

City  
EL DORADO HILLSState  
CAZip Code  
95762-6217FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.96

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733059**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AHN, ROGER, , ,**

Mailing Address 2807 NORTH 160 STREET

City  
OMAHAState  
NEZip Code  
68116-2061FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

373.90

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734429**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

43.72



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5573 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALFARO, ROSA, , ,**

Mailing Address 3059 HAWKSCREST DR

City  
WINCHESTERState  
CAZip Code  
92596-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731705**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALKIRE, MAUNIE LOU, , ,**

Mailing Address 6 SUMMIT DRIVE

City  
KIMBERLING CITYState  
MOZip Code  
65686-9418FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731893**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALKIRE, MAUNIE LOU, , ,**

Mailing Address 6 SUMMIT DRIVE

City  
KIMBERLING CITYState  
MOZip Code  
65686-9418FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

341.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732330**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5574 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLEY, BEVERLY, , ,**

Mailing Address 13404 E LAKESHORE DR

City  
PRAIRIEVILLEState  
LAZip Code  
70769-4474FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731898

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALYN, IRENE, B., ,**

Mailing Address 419 TOWN ROAD

City  
DAYTONState  
PAZip Code  
16222-5513FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734102

Amount of Each Receipt this Period

21.09

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALYN, IRENE, B., ,**

Mailing Address 419 TOWN ROAD

City  
DAYTONState  
PAZip Code  
16222-5513FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

541.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734297

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

132.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5575 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732403

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMICK, ROBERT, , ,**

Mailing Address 1431 SCARBORO HILLS LANE

City  
ROCKWALLState  
TXZip Code  
75087-2429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734694

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMSTUTZ, SHERYL, , ,**Mailing Address 1307 S WATER ST  
UNIT 90City  
SILVERTONState  
ORZip Code  
97381-2471FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

866.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733209

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

87.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5576 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733396

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CYNTHIA, , ,**

Mailing Address 2641 HY TOP ROAD

City  
YOUNG HARRISState  
GAZip Code  
30582-1957FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735276

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, MARK, , ,**

Mailing Address 50 DONOVAN FARM WAY

City  
NORWELLState  
MAZip Code  
02061-2538FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733057

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.12

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5577 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, NANCY, , ,**

Mailing Address 575 72ND ST SE

City  
MONTROSEState  
MNZip Code  
55363-8003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FOOD SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735087**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, RANDY, H., MR.,**

Mailing Address 335 DEVONSHIRE DR.

City  
BREAState  
CAZip Code  
92821-6010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736837**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANTOSIEWICZ, KAZ, , ,**

Mailing Address 3 AUTUMN STREET

City  
SPRINGFIELDState  
VTZip Code  
05156-3402FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734547**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5578 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARONCHICK, ELIZABETH, , ,**

Mailing Address 5310 NORTH OCEAN DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33404-2568FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733232**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AULICH, KENNETH, RICHARD, MR.,**

Mailing Address 705 VZ COUNTY ROAD 3211

City  
WILLS POINTState  
TXZip Code  
75169-7115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736451**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AZEVEDO, KATHRYN, N., MRS.,**

Mailing Address 1108 VALLEY VIEW DR.

City  
ENNISState  
TXZip Code  
75119-8036FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

508.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733587**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5579 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AZEVEDO, KATHRYN, N., MRS.,**

Mailing Address 1108 VALLEY VIEW DR.

City  
ENNISState  
TXZip Code  
75119-8036FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735904**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BACHOVCHIN, WILLIAM, , ,**

Mailing Address 136 HARRISON AVENUE

City  
BOSTONState  
MAZip Code  
02111-1817FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

TUFTS UNIVERSITY

Occupation (for Individual)

PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736637**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAILEY, ANN, , ,**

Mailing Address 104 CLUB PLACE CT

City  
WARNER ROBINSState  
GAZip Code  
31088-7551FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

733.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731510**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

233.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5580 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BALTHASER, MARY ANN, , ,**

Mailing Address 26 LITTLEJOHN LN

City  
ROCKLEDGEState  
FLZip Code  
32955-2411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.50

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735123**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAMERT, TOM, , ,**

Mailing Address BOX 336

City  
IONEState  
CAZip Code  
95640-0336FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1402.91

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735849**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BANNON, SUZY, , ,**

Mailing Address 3419 VIA LIDO #366

City  
NEWPORT BEACHState  
CAZip Code  
92663-3908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.70

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731709**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5581 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAREA, LELAINE, , ,**

Mailing Address 2263 SW 12 ST

City  
MIAMIState  
FLZip Code  
33135-5016FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LELAINE BAREAOccupation (for Individual)  
COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735314**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARNETT, EARL, , ,**

Mailing Address 1404 DRUMMOND CEMETERY RD

City  
JASPERState  
ALZip Code  
35504-5408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734595**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARNES, PAUL, , ,**

Mailing Address 338 SUNSHINE WAY

City  
TURLOCKState  
CAZip Code  
95382-7373FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

344.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731957**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5582 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARR, JONNA, , ,**

Mailing Address 4516 WEYBRIDGE DRIVE

City  
COLUMBIAState  
MOZip Code  
65203-6429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732722

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARR, JONNA, , ,**

Mailing Address 4516 WEYBRIDGE DRIVE

City  
COLUMBIAState  
MOZip Code  
65203-6429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733115

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARRON, REGINA, , ,**

Mailing Address 38 HAWTHORNE ESTATES

City  
ST LOUISState  
MOZip Code  
63131-3029FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

302.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733627

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

101.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5583 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARRON, REGINA, , ,**

Mailing Address 38 HAWTHORNE ESTATES

City  
ST LOUISState  
MOZip Code  
63131-3029FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735523**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARTO, THEODORE, , ,**

Mailing Address 1245 DEACON RD

City  
HAINESPORTState  
NJZip Code  
08036-3634FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732827**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEGO, DAVID, A., ,**

Mailing Address P.O. BOX 501796

City  
INDIANAPOLISState  
INZip Code  
46250-6796FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EMSOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732899**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

181.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5584 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEHRENS, B., ANTHONY, ,**

Mailing Address 14555 HWY 163

City  
HARRISBURGState  
ARZip Code  
72432-9026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733654**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BELL, BONNIE, , ,**

Mailing Address 778 1ST ST NW

City  
SAINT PAULState  
MNZip Code  
55112-3216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732875**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BELL, BONNIE, , ,**

Mailing Address 778 1ST ST NW

City  
SAINT PAULState  
MNZip Code  
55112-3216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733502**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5585 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BELL, BONNIE, , ,**

Mailing Address 778 1ST ST NW

City  
SAINT PAULState  
MNZip Code  
55112-3216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733709**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BELLFLOWER, KEVIN, , ,**

Mailing Address 1723 MONARCH DR

City  
NAPAState  
CAZip Code  
94558-1620FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PACIFIC GAS AND ELECTRIC COMPANYOccupation (for Individual)  
OPERATIONS SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735015**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BENNETT, ALBERT, , ,**

Mailing Address 200 MORRILL RD

City  
STARKVILLEState  
MSZip Code  
39759-5390FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733026**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

219.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5586 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BENNETT, BOB, , ,**

Mailing Address 14474 NAVAJO WAY

City  
MANTECAState  
CAZip Code  
95336-2546FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733185

Amount of Each Receipt this Period

59.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BENNETT, JERRY, , ,**

Mailing Address 392 WEST STATE

City  
WAVERLYState  
ILZip Code  
62692-1062FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736336

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERG, ELIZABETH, , ,**Mailing Address 555 MAIN ST  
APT 606SCity  
NEW YORKState  
NYZip Code  
10044-0165FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731599

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5587 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BERG, ELIZABETH, , ,**

Mailing Address 555 MAIN ST  
APT 606S

City  
NEW YORK

State  
NY

Zip Code  
10044-0165

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.04

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27734610**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERG, ELIZABETH, , ,**

Mailing Address 555 MAIN ST  
APT 606S

City  
NEW YORK

State  
NY

Zip Code  
10044-0165

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.04

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27735819**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISON

State  
NJ

Zip Code  
08820-4200

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27733610**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5588 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733799**

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BETMAN, RACHEL, , ,**

Mailing Address 5 GALLO WAY

City  
EDISONState  
NJZip Code  
08820-4200FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3737.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736207**

Amount of Each Receipt this Period

0.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731603**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.55



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5589 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BICKFORD, JACK, , ,**

Mailing Address 404 KELLY PLANTATION DR.#807

City  
DESTINState  
FLZip Code  
32541-8469FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731631

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BINGHAM, GLENN, S., MR.,**

Mailing Address 721 STEWARTS RD

City  
LANEXAState  
VAZip Code  
23089-8804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735803

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BINIENDA, MARY, E., MS.,**Mailing Address 28413 ABBEY LN  
APT 172City  
NEW HUDSONState  
MIZip Code  
48165-2804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

844.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734858

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

71.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5590 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BINIENDA, MARY, E., MS.,**Mailing Address 28413 ABBEY LN  
APT 172City  
NEW HUDSONState  
MIZip Code  
48165-2804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734887**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BINIENDA, MARY, E., MS.,**Mailing Address 28413 ABBEY LN  
APT 172City  
NEW HUDSONState  
MIZip Code  
48165-2804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736236**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BITTER, REED, K., MR.,**

Mailing Address 1633 TEMPLEVIEW DR.

City  
BOUNTIFULState  
UTZip Code  
84010-1389FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733214**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

295.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5591 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLACKMON, HARRY, , ,**

Mailing Address 708 PISGAH RD.

City  
FLORENCEState  
SCZip Code  
29501-6703FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734459**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLACKSTONE, MICHAEL, , ,**

Mailing Address 2358 RIVERSIDE AVEVILLA RIVA 106

City  
JACKSONVILLEState  
FLZip Code  
32204-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MICHAEL BLACKSTONEOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733670**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLACKSTONE, MICHAEL, , ,**

Mailing Address 2358 RIVERSIDE AVEVILLA RIVA 106

City  
JACKSONVILLEState  
FLZip Code  
32204-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MICHAEL BLACKSTONEOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1001.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735532**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5592 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLAUVELT, SHIRLEY, M., MS.,**

Mailing Address 15523 CHENAL RD.

City  
JARREAUState  
LAZip Code  
70749-3513FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733457**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLAUVELT, SHIRLEY, M., MS.,**

Mailing Address 15523 CHENAL RD.

City  
JARREAUState  
LAZip Code  
70749-3513FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733463**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLAUVELT, SHIRLEY, M., MS.,**

Mailing Address 15523 CHENAL RD.

City  
JARREAUState  
LAZip Code  
70749-3513FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733510**

Amount of Each Receipt this Period

3.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5593 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLOUNT, KATHY, , ,**

Mailing Address 787 JULIE DR

City  
VIDALIAState  
GAZip Code  
30474-5524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICAN INCOME TAX SERVICE INCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734244**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOBZIEN, ANN, , ,**

Mailing Address 52 RAVEN DRIVE

City  
ROCKY POINTState  
NCZip Code  
28457-9440FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732027**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOLINGER, REBA, S., MS.,**

Mailing Address 543 W 6TH ST

City  
LITITZState  
PAZip Code  
17543-2408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735833**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

210.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5594 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOOTHBY, ROBERT, , ,**

Mailing Address 485 STARBOARD LN

City  
PORT HUENEMEState  
CAZip Code  
93041-2784FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOREALOccupation (for Individual)  
IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734722**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732267**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BORNHEIMER, JIM, , ,**

Mailing Address 911 SHERMAN PKWY

City  
BELTONState  
MOZip Code  
64012-4207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1808.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735277**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5595 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOROS, ELSIE, I., MRS.,**

Mailing Address 3432 MEADOW WOODS DR.

City  
BIRMINGHAMState  
ALZip Code  
35216-4408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734315**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOSS, CLINTON, , ,**

Mailing Address 10242 MATTOCK AVENUE

City  
DOWNEYState  
CAZip Code  
90241-3003FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.26

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731806**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOU, SOKHOEUN, , ,**

Mailing Address 12 WOODBRIDGE MANOR ROAD

City  
ANSONIAState  
CTZip Code  
06401-2626FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MEDTRONICOccupation (for Individual)  
TECH III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

417.50

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736198**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5596 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUCHER, PAUL, , ,**

Mailing Address 551 SW SANCTUARY DR.

City  
PORT SAINT LUCIEState  
FLZip Code  
34986-2043FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IWTOccupation (for Individual)  
PRESIDENT AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733174**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUCHER, PAUL, , ,**

Mailing Address 551 SW SANCTUARY DR.

City  
PORT SAINT LUCIEState  
FLZip Code  
34986-2043FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IWTOccupation (for Individual)  
PRESIDENT AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735223**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUCHER, PAUL, , ,**

Mailing Address 551 SW SANCTUARY DR.

City  
PORT SAINT LUCIEState  
FLZip Code  
34986-2043FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IWTOccupation (for Individual)  
PRESIDENT AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

913.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735463**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.15



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5597 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUCHER, PAUL, , ,**

Mailing Address 551 SW SANCTUARY DR.

City  
PORT SAINT LUCIEState  
FLZip Code  
34986-2043FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
IWTOccupation (for Individual)  
PRESIDENT AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735627**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732302**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732438**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5598 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732452

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732486

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

820.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732530

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5599 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUDREAUX, LINDA, , ,**

Mailing Address 1556 BEACONSHIRE RD

City  
HOUSTONState  
TXZip Code  
77077-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.31

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732831**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOULINEAU, EDWARD, C., MR.,**

Mailing Address 100 CIRCLE DR

City  
STATESBOROState  
GAZip Code  
30461-0578FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736592**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOWEN-SMITH, FRED, W., MR.,**

Mailing Address 8914 SE BRIDGE RD

City  
HOBE SOUNDState  
FLZip Code  
33455-5311FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THE KITCHEN STRANDOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732931**

Amount of Each Receipt this Period

104.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5600 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOWMAN, ROSEMARIE, , ,**

Mailing Address 233 MCLEOD AVE

City  
MISSOULAState  
MTZip Code  
59801-4303FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734671**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, BARBARA, , ,**

Mailing Address 12590 SE ASHLEY STREET

City  
CLACKAMASState  
ORZip Code  
97015-8629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732938**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOYD, BONNIE, J., ,**

Mailing Address 8656 SUNNYSLOPE DR.

City  
SAN GABRIELState  
CAZip Code  
91775-1129FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

858.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731721**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

137.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5601 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOYLE, WILLIAM, , ,**

Mailing Address 4807 FAIRFORD DR.

City  
SAN ANTONIOState  
TXZip Code  
78228-1013FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MILITARY MINISTRY OF CRUOccupation (for Individual)  
FIELD MISSIONARY STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736781**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOZEMAN, BARBARA, , ,**

Mailing Address 2414 HIGHWAY 53 E

City  
JASPERState  
GAZip Code  
30143-4346FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732602**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRADFORD, MARILYN, , ,**

Mailing Address PO BOX 645

City  
KILAUEAState  
HIZip Code  
96754-0645FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731621**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5602 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRANDNER, PATRICK, , ,**

Mailing Address 4 MENAGGIO CT

City  
HENDERSONState  
NVZip Code  
89011-2815FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731982

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRNAK, JIM, , ,**

Mailing Address 110 WEST MORGAN AVENUE

City  
KEENESBURGState  
COZip Code  
80643-9042FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733231

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRODERICK, FRANCIS, , ,**

Mailing Address 16 DUCK POND LN

City  
RAMSEYState  
NJZip Code  
07446-1643FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.43

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736886

Amount of Each Receipt this Period

2.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

94.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5603 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRONSON, DORSEY, , MR.,**

Mailing Address 6 SPRING HI TRACE

City  
MOBILEState  
ALZip Code  
36608-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734074

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROSTOWITZ, MICHAEL, , MR.,**Mailing Address 1322 S PRAIRIE AVE  
UNIT 1606City  
CHICAGOState  
ILZip Code  
60605-3083FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734895

Amount of Each Receipt this Period

34.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735105

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5604 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWER, PATRICIA, , ,**

Mailing Address 3 WINCHESTER PL.

City  
ALBANYState  
NYZip Code  
12211-1139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736468**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, AUGUSTA, , ,**

Mailing Address P.O. BOX 345

City  
DARRINGTONState  
WAZip Code  
98241-0345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731700**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, CHARLES, W., MR.,**

Mailing Address 635 CONDER RD

City  
COPPERAS COVEState  
TXZip Code  
76522-7002FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736331**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.53



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5605 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWNE, RICHARD, , ,**

Mailing Address 15108 W HICKORY RD

City  
ZIONState  
ILZip Code  
60099-9525FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734871**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRUMAN, BERNARD, , ,**

Mailing Address PO BOX762

City

CHILOQUIN

State

OR

Zip Code

97624-0762

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732009**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRUMBAUGH, PHILIP, C., MR.,**

Mailing Address 108 PHILIP DR

City

WEST MILTON

State

OH

Zip Code

45383-1330

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731718**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5606 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRUNE, REBECCA, , ,**

Mailing Address 5641 FLACK DR.

City  
HOUSTONState  
TXZip Code  
77081-7405FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1276.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733620**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRYANT, BASSETT, , ,**

Mailing Address 112 ADOBE PO 350

City  
RUIDOSO DOWNSState  
NMZip Code  
88346-9713FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735311**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURDICK, CHARLES, , ,**

Mailing Address 2826 LEMAR STREET

City  
SILVER SPRINGState  
MDZip Code  
20904-1836FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ITA INTERNATIONAL LLCOccupation (for Individual)  
ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734081**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5607 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURNS, MICHAEL, J., ,**

Mailing Address 7287 HORIZON DRIVE

City  
WEST PALM BEACHState  
FLZip Code  
33412-3027FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736254**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUTLER, SUSAN, , ,**

Mailing Address 6438 NORTH DESERT WIND CIRCLE

City  
TUCSONState  
AZZip Code  
85750-0978FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734708**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUTZER, DONNA, , ,**

Mailing Address 943 WELKIN COURT

City  
CONWAYState  
SCZip Code  
29526-9275FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

388.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731759**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5608 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CADICAMO, EVELYN, M., MRS.,**

Mailing Address 43577 SERENITY DR

City  
NORTHVILLEState  
MIZip Code  
48167-8932FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.71

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736089**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CADY, WILLIAM, CURTIS, MR.,**

Mailing Address 1426 SOUTH 50TH STREET

City  
KANSAS CITYState  
KSZip Code  
66106-1726FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.92

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732008**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAIN, LARRY, , MR.,**

Mailing Address 1806 S MCELROY ST

City  
CRANEState  
TXZip Code  
79731-4421FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LP CAIN ASSOCIATESOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735553**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

153.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5609 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAIN, LARRY, , MR.,**

Mailing Address 1806 S MCELROY ST

City  
CRANEState  
TXZip Code  
79731-4421FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LP CAIN ASSOCIATESOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735612**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CALASCIONE, PATRICIA, A., MRS.,**

Mailing Address 46 BAY 20 STREET

City  
BROOKLYNState  
NYZip Code  
11214-3802FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY PRO GROUP, INCOccupation (for Individual)  
EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734317**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CALASCIONE, PATRICIA, A., MRS.,**

Mailing Address 46 BAY 20 STREET

City  
BROOKLYNState  
NYZip Code  
11214-3802FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY PRO GROUP, INCOccupation (for Individual)  
EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

368.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734348**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5610 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CALASCIONE, PATRICIA, A., MRS.,**

Mailing Address 46 BAY 20 STREET

City  
BROOKLYNState  
NYZip Code  
11214-3802FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CITY PRO GROUP, INCOccupation (for Individual)  
EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735715**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CALVARUSO, MICHAEL, , ,**

Mailing Address 304 CENTRAL AVENUE

City  
VINE GROVEState  
KYZip Code  
40175-1472FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734787**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CALZADA, MARGARITA, Y., ,**

Mailing Address 11375 SAGE AVENUE

City  
FONTANAState  
CAZip Code  
92337-0119FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CHAPARRAL MEDICAL GROUPOccupation (for Individual)  
PATIENT SERVICES REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.52

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733657**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5611 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CANNELLA, SUELLEN, , ,**

Mailing Address 308 GREENVIEW CIRCLE

City  
GREENVILLEState  
SCZip Code  
29609-1967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732639**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CANNELLA, SUELLEN, , ,**

Mailing Address 308 GREENVIEW CIRCLE

City  
GREENVILLEState  
SCZip Code  
29609-1967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734161**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAPLIN, DAVID, J., ,**

Mailing Address 124 WATER TURKEY CT

City  
DAYTONA BEACHState  
FLZip Code  
32119-8710FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732011**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

184.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5612 OF 6441

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARISONE, ANTOINETTE, , ,**

Mailing Address 10 VITALE TRL

City  
GREEN BROOKState  
NJZip Code  
08812-1904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735308**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARLSON, CYNTHIA, , ,**

Mailing Address 1404 HONEY LN

City  
KOKOMOState  
INZip Code  
46902-3920FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732372**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARNES, CALLAND, , ,**

Mailing Address 11078 SAFFOLD WAY

City  
RESTONState  
VAZip Code  
20190-3812FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

629.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735907**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.56



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5613 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734380**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735719**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735742**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5614 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARPENTER, SANDRA, , ,**

Mailing Address 601 TURRENTINE AVE

City  
GADSDENState  
ALZip Code  
35901-4055FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMPASSUS HOSPICEOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2157.28

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736088**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARR, HARLEY, , MR.,**

Mailing Address 17011 CEDAR PLZ APT 6C

City  
OMAHAState  
NEZip Code  
68130-2379FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.38

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731689**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARREL, RONALD, , ,**

Mailing Address 10456 E 201ST ST S

City  
BIXBYState  
OKZip Code  
74008-6747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.29

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735542**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5615 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARRIER, CONNIE, , ,**

Mailing Address 279 WEST 1080 SOUTH

City  
HURRICANEState  
UTZip Code  
84737-2345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HURRICANE FAMILY CLINICOccupation (for Individual)  
MEDICAL RECEPTIONIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734334**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARROLL, DANIEL, B., MR.,**

Mailing Address PO BOX 127

City  
LAKE ORIONState  
MIZip Code  
48361-0127FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ROYAL OAK INDUSTRIESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732299**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARROLL, DAVID, , ,**

Mailing Address 2727 SYLVAN WAY

City  
MCKINNEYState  
TXZip Code  
75072-4048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736526**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

240.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5616 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARROLL, SHIRLEY, , ,**

Mailing Address 1509 MOSSWOOD LANE

City  
WOODSTOCKState  
GAZip Code  
30189-6811FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
METRO RESAOccupation (for Individual)  
SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736061**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARTER, WILLIAM, , ,**

Mailing Address 1980 CRESCENT BEACH ROAD

City  
MANISTEEState  
MIZip Code  
49660-8914FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736248**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARVER, CYNDI, , ,**Mailing Address 25739 135TH AVE SE  
UNIT 71City  
KENTState  
WAZip Code  
98042-3551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736762**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5617 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CASSENTI, JEAN, , ,**

Mailing Address 29 ARNOLD DR

City  
TOLLANDState  
CTZip Code  
06084-2810FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735994**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CASSENTI, JEAN, , ,**

Mailing Address 29 ARNOLD DR

City  
TOLLANDState  
CTZip Code  
06084-2810FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736872**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAVANAUGH, CHRISTOPHER, , ,**

Mailing Address 13000 COBBLESTONE PARKWAY

City  
OKLAHOMA CITYState  
OKZip Code  
73142-2204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
B2 FINANCIALOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734532**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

545.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5618 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CERNUDA, HERMINIO, L., MR.,**

Mailing Address 5320 SW 5TH TER

City  
CORAL GABLESState  
FLZip Code  
33134-1126FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735326**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHAMBERLIN, CLINT, , ,**

Mailing Address 1519 5TH AVENUE WEST

City  
WILLISTONState  
NDZip Code  
58801-3903FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734289**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAMBERLIN, CLINT, , ,**

Mailing Address 1519 5TH AVENUE WEST

City  
WILLISTONState  
NDZip Code  
58801-3903FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

427.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735642**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5619 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANA, MAGHAR, S., MR.,**

Mailing Address 315 MERCEDES LANE

City  
COLBURNState  
INZip Code  
47905-4566FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.51

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734268**

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANA, MAGHAR, S., MR.,**

Mailing Address 315 MERCEDES LANE

City  
COLBURNState  
INZip Code  
47905-4566FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.51

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735827**

Amount of Each Receipt this Period

3.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHANCELLOR CASE, NANCY, J., MS.,**Mailing Address 24001 CINCO VILLAGE CENTER BLVD  
APT 1134City  
KATYState  
TXZip Code  
77494-8420FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1082.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735971**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

44.24

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5620 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANCE, VERNON, , , JR.**

Mailing Address 430 LLOYD LANE

City  
SHREVEPORTState  
LAZip Code  
71106-4741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734957

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANDRA, HAROLD, , ,**

Mailing Address 132 OLD LAKE ST

City  
WEST HARRISONState  
NYZip Code  
10604-1611FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731782

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHASE, KENNETH, R., MR.,**

Mailing Address 12227 RIOS RD

City  
SAN DIEGOState  
CAZip Code  
92128-2703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735512

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

187.49



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5621 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHAVEZ, GEORGE, , ,**

Mailing Address POST OFFICE BOX 393

City  
YERMOState  
CAZip Code  
92398-0393FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KBROccupation (for Individual)  
VEHICLE SUPPORT TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735634**

Amount of Each Receipt this Period

78.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHOW, ADA, , ,**

Mailing Address 2100 TOWERS , PH1

City

COCOA BEACH

State

FL

Zip Code

32931-

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734584**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CITRON, DIANE, M., MRS.,**

Mailing Address 2620 ARIZONA AVE, APT 3

City

SANTA MONICA

State

CA

Zip Code

90404-1415

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

613.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732149**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

179.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5622 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735014**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLABORN, MONYA, , ,**

Mailing Address 2855 MARINA DR.

City  
ATHENSState  
ALZip Code  
35611-8681FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CORNERSTONE DETENTIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735975**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLAGGETT, RONALD, , ,**

Mailing Address 6440 SKY POINTE DR. 140-138

City  
LAS VEGASState  
NVZip Code  
89131-4047FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733965**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5623 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLAGGETT, RONALD, , ,**

Mailing Address 6440 SKY POINTE DR. 140-138

City  
LAS VEGASState  
NVZip Code  
89131-4047FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.72

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733975

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLAGGETT, RONALD, , ,**

Mailing Address 6440 SKY POINTE DR. 140-138

City  
LAS VEGASState  
NVZip Code  
89131-4047FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.72

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733976

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLAGGETT, RONALD, , ,**

Mailing Address 6440 SKY POINTE DR. 140-138

City  
LAS VEGASState  
NVZip Code  
89131-4047FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.72

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733977

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

53.28

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5624 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLAGGETT, RONALD, , ,**

Mailing Address 6440 SKY POINTE DR. 140-138

City  
LAS VEGAS

State  
NV

Zip Code  
89131-4047

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.72

Date of Receipt

02 / 28 / 2025

**Transaction ID : SA11A.27733988**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLAGGETT, RONALD, , ,**

Mailing Address 6440 SKY POINTE DR. 140-138

City  
LAS VEGAS

State  
NV

Zip Code  
89131-4047

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.72

Date of Receipt

02 / 28 / 2025

**Transaction ID : SA11A.27733997**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLAPP, WILLIAM, , MR.,**

Mailing Address 1115 COPPER MOON LANE

City  
NORTH LAS VEGAS

State  
NV

Zip Code  
89031-1910

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.56

Date of Receipt

02 / 28 / 2025

**Transaction ID : SA11A.27732096**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5625 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLARK, RAY, , ,**

Mailing Address 9894 BOAT CLUB ROAD

City  
FORT WORTHState  
TXZip Code  
76179-6001FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MOTIVATING GRAPHICSOccupation (for Individual)  
PRINTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731904**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, RICKEY, , ,**

Mailing Address 2157 N FARM ROAD 197

City  
SPRINGFIELDState  
MOZip Code  
65802-9285FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735155**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLAVEL, ROBERT, L., MR.,**

Mailing Address 827 CARILLON DR.

City  
BARTLETTState  
ILZip Code  
60103-4596FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

718.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734975**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5626 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLEMENTS, ASHLEY, , ,**

Mailing Address 3950 WHEELER ROAD

City  
BAY CITYState  
MIZip Code  
48706-1857FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CLEMENTS CONTRACTINGOccupation (for Individual)  
OFFICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732527**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLOSSON, CHARLES, , ,**

Mailing Address 134 BOBAROSA AVENUE

City

MURPHYSBORO

State

IL

Zip Code

62966-6144

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735316**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLOUD, ALLEN, , ,**

Mailing Address 2109 LAKEVIEW LOOP

City

KILLEEN

State

TX

Zip Code

76543-5575

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733832**

Amount of Each Receipt this Period

475.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

556.09

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5627 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLOUGH, CHARLES, A., MR.,**

Mailing Address 303 HEMINGWAY DRIVE

City  
BEL AIR

State  
MD

Zip Code  
21014-3216

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.60

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27731711**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLOUGH, CHARLES, A., MR.,**

Mailing Address 303 HEMINGWAY DRIVE

City  
BEL AIR

State  
MD

Zip Code  
21014-3216

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.60

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27733962**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COKER, RUTH, J., MS.,**

Mailing Address P.O. BOX 814

City  
ROOSEVELT

State  
AZ

Zip Code  
85545-0814

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

380.08

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27731668**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

96.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5628 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLE, MARYANNE, E., MS.,**

Mailing Address 131 TENBURY RD

City  
LUTHERVILLE TIMONIState  
MDZip Code  
21093-6340FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732604**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLINS, CAROLE, , ,**

Mailing Address 5715 IVES PL.

City  
RIVERSIDEState  
CAZip Code  
92506-3541FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731970**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINS, CAROLE, , ,**

Mailing Address 5715 IVES PL.

City  
RIVERSIDEState  
CAZip Code  
92506-3541FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

574.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732014**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.52



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5629 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINS, CARY, , ,**

Mailing Address 2390 STATE HIGHWAY 17

City  
PHELPSState  
WIZip Code  
54554-9472FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735661

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731827

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731837

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

64.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5630 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731838**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLINGS, JERI, , ,**

Mailing Address 350 E 2200 N, APT 212

City  
LOGANState  
UTZip Code  
84341-1865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JERANBI INCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731845**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLUM, JANET, , ,**

Mailing Address 227 GRIZZLY RD.

City  
ROYALState  
ARZip Code  
71968-9423FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731333**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5631 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONDON, EDWARD, , ,**

Mailing Address 1 MARTINGALE GATE

City  
SAINT JAMESState  
NYZip Code  
11780-3546FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CONDON MEDICALOccupation (for Individual)  
ENDOCRINOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732733**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONRAD, STUART, W., MR.,**

Mailing Address 8522 FREDERICK DR.

City  
DE SOTOState  
KSZip Code  
66018-7110FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731731**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONRAD, THOMAS, , ,**

Mailing Address 374 REDBUD PL

City  
GREENWOODState  
INZip Code  
46142-3722FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736384**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5632 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONSTANZI, CHARLES, B., ,**

Mailing Address P.O. BOX 670

City  
PRINCETONState  
LAZip Code  
71067-0670FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

743.52

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732810**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONSTANZI, CHARLES, B., ,**

Mailing Address P.O. BOX 670

City  
PRINCETONState  
LAZip Code  
71067-0670FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

743.52

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735360**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COOMBES, JIM, , MR.,**Mailing Address 7031 BEACH DR. SW  
APT DCity  
SEATTLEState  
WAZip Code  
98136-2095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CONSTRUCTION PLANNING AND M.Occupation (for Individual)  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

528.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735682**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

199.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5633 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORBETT, ALTON, D., ,**

Mailing Address 581 HUNTINGTON DR.

City  
WEST COLUMBIA

State  
SC

Zip Code  
29169-4409

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.80

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

Transaction ID : SA11A.27732174

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CORDELL, KENNY, , ,**

Mailing Address 107 PARKVIEW WAY

City  
NEWTOWN SQUARE

State  
PA

Zip Code  
19073-2254

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.66

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

Transaction ID : SA11A.27734570

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORDELL, KENNY, , ,**

Mailing Address 107 PARKVIEW WAY

City  
NEWTOWN SQUARE

State  
PA

Zip Code  
19073-2254

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.66

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

Transaction ID : SA11A.27734682

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

172.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5634 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORMIER, WILLIAM, , MR.,**

Mailing Address 1025 MAIN ST

City  
LEOMINSTERState  
MAZip Code  
01453-1909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735010**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CORNELIUSON, KAYE, , ,**

Mailing Address 5456 N WOODSON AVENUE

City  
FRESNOState  
CAZip Code  
93711-2548FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PHILIP P CORNELIUSONOccupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.98

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732265**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORTESE, FRIEDA, , ,**

Mailing Address 24 WESTBOURNE LANE

City  
MELVILLEState  
NYZip Code  
11747-3305FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

309.82

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734554**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

127.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5635 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COSMO, LARRY, , ,**

Mailing Address 5207 THE POINTE

City  
ENGLEWOODState  
FLZip Code  
34223-8108FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735962**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COX, JUNE, , ,**

Mailing Address 159 NTH 4TH AVE

City  
FORSYTHState  
MTZip Code  
59327-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731998**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COX, JUNE, , ,**

Mailing Address 159 NTH 4TH AVE

City  
FORSYTHState  
MTZip Code  
59327-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

318.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732019**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5636 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COX, JUNE, , ,**

Mailing Address 159 NTH 4TH AVE

City  
FORSYTHState  
MTZip Code  
59327-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732115

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COX, JUNE, , ,**

Mailing Address 159 NTH 4TH AVE

City  
FORSYTHState  
MTZip Code  
59327-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732785

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRABTREE, CYNTHIA, , ,**

Mailing Address 13411 FM 807

City  
DALHARTState  
TXZip Code  
79022-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

354.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732499

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.31



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5637 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POST

State  
NY

Zip Code  
14870-9345

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

**Transaction ID : SA11A.27734156**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POST

State  
NY

Zip Code  
14870-9345

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

**Transaction ID : SA11A.27734250**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POST

State  
NY

Zip Code  
14870-9345

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

**Transaction ID : SA11A.27734497**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

202.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5638 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735245

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIG, CHARLES, R., ,**

Mailing Address 18 KNOLLBROOK LN. E

City  
PAINTED POSTState  
NYZip Code  
14870-9345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3070.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736079

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRAIGO, JACQUELINE, L., MS.,**

Mailing Address 1049 SUMMIT DR

City  
MOUNT VERNONState  
OHZip Code  
43050-9576FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1371.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732041

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

146.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5639 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAIGO, JACQUELINE, L., MS.,**

Mailing Address 1049 SUMMIT DR

City  
MOUNT VERNONState  
OHZip Code  
43050-9576FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1371.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732851**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAIG, JUDY, , ,**

Mailing Address 4206 S. CANTAMAR DRIVE

City  
SAINT GEORGEState  
UTZip Code  
84790-4862FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732179**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRANNEY, MICHAEL, , MR.,**

Mailing Address 1111 W 1290 S

City  
PAYSONState  
UTZip Code  
84651-5770FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733123**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5640 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRENSHAW, TERRENCE, L., MR.,**Mailing Address 555 HAHAHIONE STREET  
10 DCity  
HONOLULUState  
HIZip Code  
96825-1458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733852**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CREWS, NANCY, , ,**

Mailing Address 12547 KERNAN FOREST BLVD

City  
JACKSONVILLEState  
FLZip Code  
32225-5588FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736416**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRIDDLE, MARY, , ,**

Mailing Address 37 SUNNY GLEN

City  
ALPINEState  
TXZip Code  
79830-1005FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731944**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

414.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5641 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CROUSEN, GUINN, , ,**

Mailing Address 4435 BUENA VISTA ST

City  
DALLASState  
TXZip Code  
75205-4118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732304**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CULBERTSON, LLOYD, , ,**

Mailing Address 10705S SW 69TH CT.

City  
PINECRESTState  
FLZip Code  
33156-3932FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731600**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CULLENS, JOHN, B., MR.,**

Mailing Address 145 GREEN HILLS ROAD

City  
ATHENSState  
GAZip Code  
30605-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733737**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5642 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CUNNINGHAM, GAYLE, , MRS.,**

Mailing Address 5008 96TH STREET

City  
LUBBOCKState  
TXZip Code  
79424-4820FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734479

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CUNNINGHAM, MILFORD, , MR.,**

Mailing Address 2978 S FIRST WATER LN

City  
GOLD CANYONState  
AZZip Code  
85118-1973FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736301

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURRY, ROBERT, J., ,**

Mailing Address 1205 ANDTE CIR.

City  
CLAREMOREState  
OKZip Code  
74017-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734923

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

192.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5643 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. D'OLIVE, JOE, , MR.,**

Mailing Address 6136 HALEY LN

City  
FORT WORTHState  
TXZip Code  
76132-3875FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731770**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DALE, PAMELA, , ,**

Mailing Address 18890 TIMBERLAKE DR

City  
CLAREMOREState  
OKZip Code  
74017-1443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.60

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732199**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DALLAVERDE, ANGELO, , ,**

Mailing Address 20A HEISZ ST

City  
KINGSTONState  
PAZip Code  
18704-4453FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

331.97

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731918**

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5644 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DALMAN, RONALD, , ,**

Mailing Address 701 RETREST DRIVE 137

City  
NAPLESState  
FLZip Code  
34110-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734193**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DALRYMPLE, TERRANCE, D., MR.,**

Mailing Address 1851 OXFORD TRENTON RD

City  
OXFORDState  
OHZip Code  
45056-9158FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734727**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DANOWIT, HERBERT, , ,**

Mailing Address 245 PONDERISA CT

City  
WEST PALM BEACHState  
FLZip Code  
33411-4700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ATSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732430**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

173.75



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5645 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DARLING, GARY, , ,**

Mailing Address 501 E GUIDRY ST

City  
COVINGTONState  
LAZip Code  
70433-3942FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734509**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DARLING, GARY, , ,**

Mailing Address 501 E GUIDRY ST

City  
COVINGTONState  
LAZip Code  
70433-3942FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735872**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAUGHERTY, KATHY, , ,**

Mailing Address 3896 HIGH POINTE LN

City  
NEWBURGHState  
INZip Code  
47630-8273FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.68

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735867**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5646 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAVIS, NANCY, , ,**

Mailing Address 9410 SE 174TH LOOP

City  
SUMMERFIELDState  
FLZip Code  
34491-6457FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734177**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAVIS, TINE, , ,**

Mailing Address 2210 BEACH BOULEVARD

City  
JACKSONVILLE BEACHState  
FLZip Code  
32250-2653FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

514.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736347**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAVIS, TINE, , ,**

Mailing Address 2210 BEACH BOULEVARD

City  
JACKSONVILLE BEACHState  
FLZip Code  
32250-2653FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

514.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736352**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5647 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAVIS, WILLIAM, , ,**

Mailing Address 6224 35TH ST N

City  
ARLINGTONState  
VAZip Code  
22213-1404FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CAPITOL TAX PARTNERSOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736127**

Amount of Each Receipt this Period

208.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DE MARTINO, VINCENT, R., MR.,**

Mailing Address 4281 AVOCADO AVE

City  
YORBA LINDAState  
CAZip Code  
92886-2572FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ROCKWELLOccupation (for Individual)  
ENGINEERING MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731849**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEBERARDINIS, RALPH, , ,**

Mailing Address 2210 CLEARVIEW LANE

City  
ASTONState  
PAZip Code  
19014-1605FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

424.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736533**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

280.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5648 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEGROOT, PAUL, , ,**

Mailing Address 1S500 FAIRVIEW AVE

City  
LOMBARDState  
ILZip Code  
60148-5017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1548.85

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736461**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEL ROSSO, NITA, , ,**

Mailing Address 3244 E WICKIEUP LN

City  
PHOENIXState  
AZZip Code  
85050-7915FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734921**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEL ROSSO, NITA, , ,**

Mailing Address 3244 E WICKIEUP LN

City  
PHOENIXState  
AZZip Code  
85050-7915FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736727**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5649 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEMPSEY, GORDON, H., MR.,**Mailing Address 8020 FRANKFORD RD  
APT 425City  
DALLASState  
TXZip Code  
75252-6863FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732920**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DENHOFF, DIANE, K., ,**

Mailing Address 1908 STATE ROUTE 19

City  
WELLSVILLEState  
NYZip Code  
14895-9740FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736847**

Amount of Each Receipt this Period

1.20

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DESIDERIO, FRANK, , ,**

Mailing Address 599 LEXINGTON AVE

City  
NEW YORKState  
NYZip Code  
10022-6030FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GRUNFELD DESIDERIOOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736560**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5650 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DESIDERIO, FRANK, , ,**

Mailing Address 599 LEXINGTON AVE

City  
NEW YORKState  
NYZip Code  
10022-6030FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GRUNFELD DESIDERIOOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736563

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DESSAUER, MARILYNN, , ,**

Mailing Address 8679 BLUE FLAG WAY

City  
NAPLESState  
FLZip Code  
34109-4300FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735877

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DESTEFANO, JUDY, , ,**

Mailing Address 13280 MARSH LNDG

City  
WEST PALM BEACHState  
FLZip Code  
33418-7532FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736442

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5651 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIAS PINTO, CHERYL, , ,**

Mailing Address 4831 S KILPATRICK AVENUE

City  
CHICAGOState  
ILZip Code  
60632-4828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736651**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DICKSON, JAMES, , ,**

Mailing Address 2155 CACTUS CT #1

City  
WALNUT CREEKState  
CAZip Code  
94595-2530FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733145**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIMARIO, JAMES, , ,**

Mailing Address 7657 WINNETKA AVE

City  
WINNETKAState  
CAZip Code  
91306-2677FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PROPERTY MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

378.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733247**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5652 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DITTMAR, CECI, , ,**

Mailing Address 102 OLD COURSE LANE

City  
MC CORMICKState  
SCZip Code  
29835-3216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736586**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIXON, JOSEPH, , ,**

Mailing Address 2414 NORTHERN OAK DR

City  
BRASELTONState  
GAZip Code  
30517-6057FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733313**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOREN, HARVEY, F., MR.,**

Mailing Address 123 WASHINGTON ST

City  
DEDHAMState  
MAZip Code  
02026-2031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736450**

Amount of Each Receipt this Period

17.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.87



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5653 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOWDY, JOHN, , MR., JR.**

Mailing Address 3706 N SHADYCREEK DR.

City  
ARLINGTONState  
TXZip Code  
76013-1017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732516**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOWDY, JOHN, , MR., JR.**

Mailing Address 3706 N SHADYCREEK DR.

City  
ARLINGTONState  
TXZip Code  
76013-1017FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735343**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOWNING, GEORGE, , ,**

Mailing Address 1308 EAST JULIE DRIVE

City  
TEMPEState  
AZZip Code  
85283-3117FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735390**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5654 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUGAN, MIKE, , ,**

Mailing Address 6618 LOWRY BLVD UNIT 315

City  
DENVERState  
COZip Code  
80230-6917FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736036

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUGAS, ROLAND, , MR.,**

Mailing Address 408 ELYSIAN FIELDS DR

City  
LAFAYETTEState  
LAZip Code  
70508-6058FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.87

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736187

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUGAS, ROLAND, , MR.,**

Mailing Address 408 ELYSIAN FIELDS DR

City  
LAFAYETTEState  
LAZip Code  
70508-6058FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

691.87

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736223

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

98.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5655 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUGLE, THOMAS, C., MR.,**

Mailing Address 4605 JEANNES CT

City  
WEST CHESTERState  
OHZip Code  
45069-9293FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DELTEC INCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.46

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733705**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUKES, MARIAN, , MISS,**

Mailing Address 5663 W ARROWHEAD LAKES DR.

City  
GLENDALEState  
AZZip Code  
85308-6216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.16

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732190**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNCAN, ALTA, M., ,**Mailing Address 1001 W LAMBERT RD  
SPC 160City  
LA HABRAState  
CAZip Code  
90631-1522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

246.28

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731638**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

147.38

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5656 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUVALL, RICHARD, O., ,**

Mailing Address 5811 WESTCHESTER ST.

City  
ALEXANDRIAState  
VAZip Code  
22310-1149FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733376**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735040**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EAST, ALICE, G., MRS.,**

Mailing Address PO BOX 56

City  
LINNState  
TXZip Code  
78563-0056FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3901.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735492**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5657 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ECHOLS, DON, , ,**

Mailing Address 3461 JERROLD BLVD

City  
BRUNSWICKState  
OHZip Code  
44212-2225FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734086**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ECHOLS, ELIZABETH, , MRS.,**

Mailing Address 369 HUNTINGTON LAKE CIR

City  
PAWLEYS ISLANDState  
SCZip Code  
29585-6174FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732895**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ECKLES, VICKIE, , ,**

Mailing Address 40 LEBANON AVE

City  
GREENVILLEState  
PAZip Code  
16125-1918FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736855**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5658 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EDWARDS, KEVIN, , ,**

Mailing Address 6153 FAIRLAWN DRIVE SW

City  
LAKEWOODState  
WAZip Code  
98499-2433FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TRANSERVICE LOGISTICSOccupation (for Individual)  
COMMERCIAL DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.40

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732996**

Amount of Each Receipt this Period

22.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EHLERT, GARY, , DR.,**

Mailing Address 55 FOREST CREEK CT

City  
GRAND ISLANDState  
NYZip Code  
14072-3500FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PRN MD PLLCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733306**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EKSTROM, MEGAN, , ,**

Mailing Address 2909 COAST LINE CT

City  
LAS VEGASState  
NVZip Code  
89117-3525FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.32

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732928**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

350.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5659 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELAS BOADO, MARIO, , ,**

Mailing Address 40120 SAGEWOOD DR

City  
PALM DESERTState  
CAZip Code  
92260-2321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733172**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELDAR, LUE ANN, , ,**

Mailing Address 1632 HARMON COVE TOWER

City  
SECAUCUSState  
NJZip Code  
07094-1766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AMAZONOccupation (for Individual)  
E-COMMERCE OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736498**

Amount of Each Receipt this Period

5.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELIASSEN, JAMES, M., DR.,**

Mailing Address 1205 20TH ST SO

City  
VIRGINIAState  
MNZip Code  
55792-3724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732787**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5660 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELIASSEN, JAMES, M., DR.,**

Mailing Address 1205 20TH ST SO

City  
VIRGINIAState  
MNZip Code  
55792-3724FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736703**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELLIOTT, JANICE, C., MRS.,**

Mailing Address 411 UPPER RD

City  
KOHLERState  
WIZip Code  
53044-1436FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732228**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMBORGO, MARITESS, , ,**

Mailing Address 62 WATERFORD CIRCLE

City  
NACOGDOCHESState  
TXZip Code  
75965-8730FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.96

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733558**

Amount of Each Receipt this Period

3.96

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

153.96



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5661 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMERY, DONALD, , ,**

Mailing Address 3525 W. KELLY PARK RD

City  
APOPKAState  
FLZip Code  
32712-5171FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EMERY MEDICALOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733088**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMI, RODERICK, MAKOTO, MR.,**

Mailing Address 2096 CORWIN RD

City  
BULLHEAD CITYState  
AZZip Code  
86442-8795FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735198**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENGBRETSON, MIRIAM, , ,**

Mailing Address 13101 SCOTTIE CT

City  
ANCHORAGEState  
AKZip Code  
99515-3855FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734260**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5662 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ERNST, EDWARD, , ,**

Mailing Address P.O. BOX 5

City  
MOHRSVILLEState  
PAZip Code  
19541-0005FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733484**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EVANS, CARTER, , ,**

Mailing Address 1 PARKLANDS DRIVE

City  
DARIENState  
CTZip Code  
06820-3656FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735643**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FAIS, BRIAN, , ,**

Mailing Address 35 HARRISON DR.

City  
LARCHMONTState  
NYZip Code  
10538-2529FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731880**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5663 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FALBO, ANNA, C., ,**

Mailing Address 1969 LINCOLN AVENUE

City  
EAST MEADOWState  
NYZip Code  
11554-2521FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734908**

Amount of Each Receipt this Period

33.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FAY, VICKY, , ,**

Mailing Address 139 SECOND COURT

City  
KEY LARGOState  
FLZip Code  
33037-2609FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735965**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734037**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5664 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FENING, DANIEL, , ,**

Mailing Address 7529 SANTA ROSA DR.

City  
NORTHFIELDState  
OHZip Code  
44067-1604FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.52

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734061**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FERGUSON, CURTIS, A., MR.,**Mailing Address 33 OFFICE PARK ROAD  
A-271

City

HILTON HEAD ISLAND

State  
SCZip Code  
29928-4612FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ATLANTIC INDUSTRIESOccupation (for Individual)  
MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.25

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734760**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FERRELL, RORY, , ,**

Mailing Address 4 ANGEL TRACE

City

BRENTWOOD

State  
TNZip Code  
37027-8947FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

271.94

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732047**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5665 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FERRELL, RORY, , ,**

Mailing Address 4 ANGEL TRACE

City  
BRENTWOODState  
TNZip Code  
37027-8947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732048

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FERRELL, RORY, , ,**

Mailing Address 4 ANGEL TRACE

City  
BRENTWOODState  
TNZip Code  
37027-8947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732049

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FERRELL, RORY, , ,**

Mailing Address 4 ANGEL TRACE

City  
BRENTWOODState  
TNZip Code  
37027-8947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

271.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732050

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5666 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FERRELL, RORY, , ,**

Mailing Address 4 ANGEL TRACE

City  
BRENTWOODState  
TNZip Code  
37027-8947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732052

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FERRELL, RORY, , ,**

Mailing Address 4 ANGEL TRACE

City  
BRENTWOODState  
TNZip Code  
37027-8947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732056

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FERRELL, RORY, , ,**

Mailing Address 4 ANGEL TRACE

City  
BRENTWOODState  
TNZip Code  
37027-8947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

271.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732058

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

103.79

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5667 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FIELDS, CONNIE, , ,**

Mailing Address 606 E MEDUSA ST

City  
SYRACUSEState  
INZip Code  
46567-1606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732680**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FINCH, OWEN, , ,**

Mailing Address 5210 CHAMPLAIN BEND ST

City  
HOUSTONState  
TXZip Code  
77056-4206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733243**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISCHER, DANIEL, , MR.,**

Mailing Address 8516 N.SAYANTE WAY

City  
TUCSONState  
AZZip Code  
85743-1405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735875**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

173.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5668 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISCHER, STEPHEN, M., MR.,**

Mailing Address 17520 LAKESEDGE TRAIL

City  
CHAGRIN FALLSState  
OHZip Code  
44023-2115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.05

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734751**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISHER, JAMES, A., MR.,**

Mailing Address 4030 S. HOLLAND ROAD

City  
FLAGSTAFFState  
AZZip Code  
86005-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.05

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732855**

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FISK, V., RONALD, MR.,**

Mailing Address 41320 FOX RUN ROAD

City  
NOVIState  
MIZip Code  
48377-5111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.33

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733408**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.90



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5669 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLACK, LUCILLE, , ,**

Mailing Address 1207 CAMPBELLAVE

City  
LYNCHBURGState  
VAZip Code  
24501-2815FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732551

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLEGENHEIMER, MARK, , ,**

Mailing Address 3494 VANGUARD DR.

City  
FRISCOState  
TXZip Code  
75034-6678FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733963

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLEMING, PAT, , ,**

Mailing Address 116 BLUE SKY DRIVE

City  
SAINT JOHNSState  
FLZip Code  
32259-7369FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736720

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

58.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5670 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731508

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731514

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731516

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

76.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5671 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731517**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731518**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731519**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5672 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731520**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731521**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731525**

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

68.77

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5673 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731528

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731529

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731530

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5674 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FONTAINE, GALE, , ,**

Mailing Address 2201 NE 44TH STREET

City  
LIGHTHOUSE POINTState  
FLZip Code  
33064-7339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731532

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FORTNER, EDWARD, , ,**

Mailing Address 13477 AURORA DRIVE

City  
SAN LEANDROState  
CAZip Code  
94577-4032FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732625

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FORTUNATO, VINCENT, , ,**

Mailing Address 5444 YAEGER COURT

City  
SAINT LOUISState  
MOZip Code  
63129-3067FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PREMIER MEDICAL PHYSICIANSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734441

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

138.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5675 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FOUST, SANDY, , ,**

Mailing Address 606 INDUSTRIAL BLVD

City  
WINFIELDState  
KSZip Code  
67156-9122FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733489**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FOX, JOHN, , ,**

Mailing Address 3724 WAINFLEET DRIVE

City  
RICHMONDState  
VAZip Code  
23235-1764FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734084**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FREDERICK, CAROL, , ,**

Mailing Address P.O. BOX 961

City  
EDGEWOODState  
NMZip Code  
87015-0961FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736759**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

433.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5676 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRIEDKIN, MONTE, , ,**

Mailing Address 7673 WOOD DUCK DRIVE

City  
BOCA RATONState  
FLZip Code  
33434-5143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735027**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRITZ, JOHN, , MR.,**

Mailing Address P.O. BOX 3115

City  
BIG BEAR LAKEState  
CAZip Code  
92315-3115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736761**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRITZ, JOHN, , MR.,**

Mailing Address P.O. BOX 3115

City  
BIG BEAR LAKEState  
CAZip Code  
92315-3115FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

986.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736770**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.21



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5677 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRONTERHOUSE, JEFF, , ,**

Mailing Address 4001 GILLON AVENUE

City  
DALLASState  
TXZip Code  
75205-3118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRAZOS PRIVATE EQUITY PARTNERSOccupation (for Individual)  
INVESTMENT PROFESSIONAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736053

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRUGE, RUBY, JOYCE, ,**

Mailing Address 2004 HIGHWAY 103

City  
PORT BARREState  
LAZip Code  
70577-5310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

751.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733471

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRY, RONALD, S., MR.,**

Mailing Address 709 N UNION ST

City  
NATCHEZState  
MSZip Code  
39120-2950FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734388

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

340.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5678 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAGNON, DONNA, , ,**

Mailing Address 2230 ANDOVER DR APT B

City  
MYRTLE BEACHState  
SCZip Code  
29575-4872FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732329

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733166

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733178

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5679 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLO, ELAINE, , ,**

Mailing Address 12998 LAKE WILDWOOD DRIVE

City  
PENN VALLEYState  
CAZip Code  
95946-9223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733894**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALLO, WILLIAM, , ,**

Mailing Address 347 6TH ST

City  
BROOKLYNState  
NYZip Code  
11215-3301FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733308**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GAMBERT, LORRAINE, , ,**

Mailing Address 55 N. MOUNTAIN AVENUE, B-9

City  
MONTCLAIRState  
NJZip Code  
07042-2343FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

346.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735536**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5680 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAMBLE, DENNY, E., MR., JR.**

Mailing Address P.O. BOX 52389

City  
SHREVEPORTState  
LAZip Code  
71135-2389FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GUEST CARE MANAGEMENTOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1244.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735913

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GANGI, LYNNE, , ,**

Mailing Address 43 QUIEN SABE ROAD

City  
SCOTTS VALLEYState  
CAZip Code  
95066-4501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735809

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GARLICK, KAREN, , ,**

Mailing Address 6481 N. LEAD AVENUE

City  
FRESNOState  
CAZip Code  
93711-1028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

697.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733077

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

123.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5681 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GATES, ALTON, , ,**

Mailing Address 9 MUSKOGEE LANE

City  
DESTINState  
FLZip Code  
32541-4432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GATES WINERYOccupation (for Individual)  
WINE MAKER, PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731924

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GATES, ALTON, , ,**

Mailing Address 9 MUSKOGEE LANE

City  
DESTINState  
FLZip Code  
32541-4432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GATES WINERYOccupation (for Individual)  
WINE MAKER, PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732918

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GAYLORD, ROBERT, , ,**

Mailing Address 1628 DUKE OF WINDSOR RD.

City  
VIRGINIA BEACHState  
VAZip Code  
23454-2506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734977

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

253.43

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5682 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GELBMAN, JOEL, , ,**

Mailing Address 6476 ARRIBA AVE

City  
NAPLESState  
FLZip Code  
34113-9061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734935

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GELUSO, FRANK, F., ,**

Mailing Address 1930 SOUTH WESTWOOD

City  
MESAState  
AZZip Code  
85210-5953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
HANDYMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733905

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GELUSO, FRANK, F., ,**

Mailing Address 1930 SOUTH WESTWOOD

City  
MESAState  
AZZip Code  
85210-5953FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
HANDYMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

512.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734070

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5683 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GEROMEL, ALICIA, , ,**

Mailing Address 4429 LINDEWOOD DR

City  
SWARTZ CREEKState  
MIZip Code  
48473-8224FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736529

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILL, LAWRENCE, , ,**

Mailing Address POB 176

City  
ABILENEState  
TXZip Code  
79604-0176FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MATTHEWS OFCOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732004

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILLMAN, JACKIE, C., MRS.,**

Mailing Address 306 COLONIAL DRIVE

City  
FRIENDSWOODState  
TXZip Code  
77546-4023FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MORIOccupation (for Individual)  
ADMINISTRATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733947

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

77.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5684 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIRVIN, JOANN, , MRS.,**

Mailing Address 7110 CREEKSIDE DR.

City  
LANSINGState  
MIZip Code  
48917-9618FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732839

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735739

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIST, JOEL, , ,**

Mailing Address 10022 S BRADEN AVE.

City  
TULSAState  
OKZip Code  
74137-5408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735807

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5685 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GLAZER, MAURICE, , ,**

Mailing Address 13747 MONTFORT DR. SUITE 350

City  
DALLASState  
TXZip Code  
75240-4488FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GLAZER FINANCIAL NETWORKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736038**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLENFIELD, STEPHEN, , ,**

Mailing Address PO BOX 596

City  
LONDONDERRYState  
NHZip Code  
03053-0596FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.61

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736590**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOMBERG, GALINA, , ,**

Mailing Address 96 CARRICK CIR.

City  
HAYWARDState  
CAZip Code  
94542-7912FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1414.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731716**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

281.18

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5686 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GONZALES, ROBERT, , ,**

Mailing Address P.O. BOX 1104

City  
KEMAHState  
TXZip Code  
77565-1104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HI-TEK SOUND SIGNALOccupation (for Individual)  
FIRE ALARM CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733743**

Amount of Each Receipt this Period

60.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOODRICH, LARRY, , ,**

Mailing Address 1603 KELLY RD.

City

BELLINGHAM

State

WA

Zip Code

98226-9588

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732886**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City

FORT MEADE

State

FL

Zip Code

33841-9531

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731757**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5687 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732113**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732163**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732258**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5688 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, DOROTHY, , ,**

Mailing Address 3044 DOC LINDSEY RD.

City  
FORT MEADEState  
FLZip Code  
33841-9531FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736429**

Amount of Each Receipt this Period

0.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORE, TRINA, , ,**

Mailing Address 14321 SOUTHWEST 20TH STREET

City  
DAVIEState  
FLZip Code  
33325-5426FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734781**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORE, TRINA, , ,**

Mailing Address 14321 SOUTHWEST 20TH STREET

City  
DAVIEState  
FLZip Code  
33325-5426FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1001.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734875**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5689 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRANDSINGER, PEGGY, , ,**

Mailing Address 5501 WEST HILDEBRAND BLVD #208

City  
KENNEWICKState  
WAZip Code  
99338-1975FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732338**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRANZIN, SUE, , ,**

Mailing Address 2804 EMERSON LANE

City  
MIDLANDState  
TXZip Code  
79705-4201FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CHILDCARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731988**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRANZIN, SUE, , ,**

Mailing Address 2804 EMERSON LANE

City  
MIDLANDState  
TXZip Code  
79705-4201FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CHILDCARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

515.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736355**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5690 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRATTIDGE, JANICE, , ,**

Mailing Address 3427 SW BRIARWOOD LANE

City  
TOPEKAState  
KSZip Code  
66611-1832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735641

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRATTIDGE, JANICE, , ,**

Mailing Address 3427 SW BRIARWOOD LANE

City  
TOPEKAState  
KSZip Code  
66611-1832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736183

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRATTIDGE, JANICE, , ,**

Mailing Address 3427 SW BRIARWOOD LANE

City  
TOPEKAState  
KSZip Code  
66611-1832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736188

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

24.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5691 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRATTIDGE, JANICE, , ,**

Mailing Address 3427 SW BRIARWOOD LANE

City  
TOPEKAState  
KSZip Code  
66611-1832FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736194**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAVES, BRUCE, , ,**

Mailing Address P O BOX 323

City  
LAWRENCEBURGState  
KYZip Code  
40342-0323FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736449**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAY, DENISE, , ,**

Mailing Address 21611 WOLF ROAD

City  
FRANKFORTState  
ILZip Code  
60423-9764FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AMERICAN DREAM HOME IMPROVEMENTOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733220**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

335.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5692 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAYBASH, PETER, J., MR., JR.**

Mailing Address 4 CAMBRIDGE DR.

City  
HERSHEYState  
PAZip Code  
17033-2100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732884

Amount of Each Receipt this Period

8.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733833

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733938

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

112.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5693 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734068**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRECH, ANGELA, , ,**

Mailing Address 510 LAUREL ST.

City  
SAN CARLOSState  
CAZip Code  
94070-2416FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HCPOccupation (for Individual)  
EX. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734565**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, BEN, W., ,**

Mailing Address P O BOX 59

City  
BIG TIMBERState  
MTZip Code  
59011-0059FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734150**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.95

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5694 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, BOB, D., MR.,**

Mailing Address 1512 ATKINSON AVE

City  
SOMERS POINT

State  
NJ

Zip Code  
08244-1119

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27732284**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, BOB, D., MR.,**

Mailing Address 1512 ATKINSON AVE

City  
SOMERS POINT

State  
NJ

Zip Code  
08244-1119

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27732622**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRIFFIN, LORRAINE, , ,**

Mailing Address 2080 ONE WHITE OAK LANE, APT 2204

City  
CUMMING

State  
GA

Zip Code  
30041-8793

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.44

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27732294**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

256.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5695 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIMES, RAYMOND, M., MR.,**

Mailing Address 257 BRIGHT ST.

City  
CAVE SPRINGSState  
ARZip Code  
72718-9690FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733498**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRISSOM, LINDA, , ,**

Mailing Address 1598 LEISURE WORLD

City  
MESAState  
AZZip Code  
85206-2315FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AWRCOccupation (for Individual)  
NURSE PRACTITIONER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732866**

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRUENDEL, LIZ, , ,**

Mailing Address 460 COUNTY ROAD 5170

City  
SALEMState  
MOZip Code  
65560-7302FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1090.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731922**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5696 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRUENDEL, LIZ, , ,**

Mailing Address 460 COUNTY ROAD 5170

City  
SALEMState  
MOZip Code  
65560-7302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1090.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734316

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUETTLER, DOUG, , ,**

Mailing Address 818 WILLOW STREET

City  
KING CITYState  
CAZip Code  
93930-3319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CWSOccupation (for Individual)  
SM SYS OPR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732517

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUM, GAYLE, , MS.,**

Mailing Address 509 VISTA CV

City  
VICTORIAState  
TXZip Code  
77904-1310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRADY BEARINGOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

645.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735855

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

137.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5697 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUNN, LAURA, , ,**

Mailing Address 64 ZACCHEUS MEAD LANE

City  
GREENWICHState  
CTZip Code  
06831-3752FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733322**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAAS, RICHARD, , ,**

Mailing Address 318BOCA DEL CANON

City  
SAN CLEMENTEState  
CAZip Code  
92672-5402FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734159**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAHNEMANN, ARTUR, , ,**

Mailing Address 4510 140TH AVE SE

City  
BELLEVUEState  
WAZip Code  
98006-2343FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732148**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5698 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAISLER, SHIRLEY, A., MS.,**

Mailing Address 1200 COWLING RD

City  
SANGERState  
TXZip Code  
76266-9084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.50

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732477**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HALL, JOEL, , MR.,**

Mailing Address 1350 BLUEGRASS LAKES PKWY

City

ALPHARETTA

State

GA

Zip Code

30004-3395

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PRO MARKETINGOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734813**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HALLQUIST, JOHN, , ,**

Mailing Address 86 SINGLETON BEACH RD

City

HILTON HEAD ISLAND

State

SC

Zip Code

29928-5326

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.46

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731742**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

173.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5699 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HALLQUIST, JOHN, , ,**

Mailing Address 86 SINGLETON BEACH RD

City  
HILTON HEAD ISLANDState  
SCZip Code  
29928-5326FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731829**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSON, BOB, , ,**

Mailing Address 1326 HICKORYCREEK CT.

City  
WICHITAState  
KSZip Code  
67235-7000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WEIGAND OMEGA MGTOccupation (for Individual)  
PROPERTY MGT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

841.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732873**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HANSON, BOB, , ,**

Mailing Address 1326 HICKORYCREEK CT.

City  
WICHITAState  
KSZip Code  
67235-7000FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WEIGAND OMEGA MGTOccupation (for Individual)  
PROPERTY MGT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

841.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734366**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5700 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARBER, BARBIE, , ,**

Mailing Address 4910 LAKEWOOD ST

City  
HARRISONState  
MIZip Code  
48625-9645FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733297

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARDIN, JOEL, C., MR.,**

Mailing Address 225 MILL RD

City  
CLEARWATERState  
IDZip Code  
83552-5116FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736335

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRELL, JULIE, B., MS.,**Mailing Address 3433 WESTHEIMER ROAD  
501City  
HOUSTONState  
TXZip Code  
77027-5529FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732257

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.14



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5701 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRISON, CAROL, , ,**

Mailing Address 2318 ST ELMOS FIRE

City  
DEER PARK

State  
TX

Zip Code  
77536-4777

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

**02** / **28** / **2025**

**Transaction ID : SA11A.27731902**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRIS, JANE, , ,**

Mailing Address 108 SOUTH CONGRESS AVENUE

City  
EVANSVILLE

State  
IN

Zip Code  
47714-0208

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NALLC

Occupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.18

Date of Receipt

**02** / **28** / **2025**

**Transaction ID : SA11A.27733584**

Amount of Each Receipt this Period

23.94

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRIS, JANE, , ,**

Mailing Address 108 SOUTH CONGRESS AVENUE

City  
EVANSVILLE

State  
IN

Zip Code  
47714-0208

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NALLC

Occupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

385.18

Date of Receipt

**02** / **28** / **2025**

**Transaction ID : SA11A.27733732**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

222.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5702 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRIS, JANE, , ,**

Mailing Address 108 SOUTH CONGRESS AVENUE

City  
EVANSVILLEState  
INZip Code  
47714-0208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NALLCOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736430

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARTMAN, FREDERICK, , ,**

Mailing Address 10191 DOTSON CT. SE

City  
LELANDState  
NCZip Code  
28451-0018FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733611

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAYES, DELMORE, G., MR.,**

Mailing Address 81862 SUN CACTUS LN

City  
LA QUINTAState  
CAZip Code  
92253-7745FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736634

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

259.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5703 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAZELL, KATHLEEN, , ,**

Mailing Address 35 WATERGATE DR.

City  
SARASOTAState  
FLZip Code  
34236-5512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731643**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEATON, HELENE, , MRS.,**

Mailing Address 36496 LOCHDALE

City  
FARMINGTON HILLSState  
MIZip Code  
48335-2189FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735239**

Amount of Each Receipt this Period

62.46

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HECK, SHIRLEY, , MS.,**

Mailing Address 12731 BEARD RD

City  
NEW SPRINGFIELDState  
OHZip Code  
44443-9717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1137.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733248**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

201.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5704 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEFFLEBOWER, BARBARA, ANN, MS.,**

Mailing Address 4415 NEGAL CIR

City  
MELBOURNEState  
FLZip Code  
32901-8503FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734808**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEISTAND, JOHN, , ,**

Mailing Address 614 TIMBERLANE DR

City  
LAKE MARYState  
FLZip Code  
32746-2571FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736642**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HELLER, KATHERINE, , ,**

Mailing Address 4652 OAKWOOD LN

City  
NAZARETHState  
PAZip Code  
18064-8533FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735728**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5705 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HELLER, KATHERINE, , ,**

Mailing Address 4652 OAKWOOD LN

City  
NAZARETHState  
PAZip Code  
18064-8533FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736383**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENDERSON, JOSEPH, , ,**

Mailing Address 2312 EAST SPRUCE STREET

City  
SEATTLEState  
WAZip Code  
98122-6053FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RECOLOGYOccupation (for Individual)  
GARBAGE MAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733614**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENDRICK, THOMAS, , ,**

Mailing Address 3601 TWIN LAKES WAY

City  
PLANOState  
TXZip Code  
75093-7538FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TCH PARTNERS, LLCOccupation (for Individual)  
PRES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732729**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5706 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENNING, THOMAS, J., MR.,**

Mailing Address 820 W 82ND ST

City  
KEARNEYState  
NEZip Code  
68845-8475FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CASH-WA DISTRIBUTING CO.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.06

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732877**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENRY, SANDRA, , ,**

Mailing Address 20467 W GOOD HOPE RD

City  
LANNONState  
WIZip Code  
53046-9607FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733877**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERRING, DAVID, B., MR.,**

Mailing Address 8728 BALLY BUNION RD

City  
PORT SAINT LUCIEState  
FLZip Code  
34986-3086FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ADMIRAL MGTOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731940**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5707 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERRICK, STEVEN, , ,**

Mailing Address 684 MARGARITA AVENUE

City  
CORONADOState  
CAZip Code  
92118-2321FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734434**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERSHBERGER, SHEILA, , ,**

Mailing Address 537 MELROSE ST.

City  
AKRONState  
OHZip Code  
44305-2813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COMMUNITY BAPTIST CHURCHOccupation (for Individual)  
PASTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735227**

Amount of Each Receipt this Period

90.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEWITT, DIANE, , MS.,**

Mailing Address 8299 HEWITT LN

City  
EDISTO ISLANDState  
SCZip Code  
29438-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732824**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5708 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEWSON, GAYE, , ,**

Mailing Address 9653 50TH AVE SW

City  
SEATTLEState  
WAZip Code  
98136-2722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731784

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HICKS, THOMAS, O., MR.,**

Mailing Address 1918 OLIVE STREET, RESIDENCE 4000

City  
DALLASState  
TXZip Code  
75201-2304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THOMAS O. HICKSOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732359

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIGGINS, NEILA, , ,**

Mailing Address 3916 N POTSDAM AVE #3760

City  
SIOUX FALLSState  
SDZip Code  
57104-7048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734014

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

255.15



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5709 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, KATHLEEN, , ,**

Mailing Address 1703 W. WEDGEWOOD LN.

City  
SPOKANEState  
WAZip Code  
99208-7127FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732645**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, RICHARD, , ,**

Mailing Address 8085 SMOKING JACKET PL

City  
LAS VEGASState  
NVZip Code  
89166-3792FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736868**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732213**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

173.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5710 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, VERNON, W., MR., II**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SITE DEVELOPMENTOccupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7487.03

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733373**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILL, WALT, , MR.,**

Mailing Address 5809 LONDON LN.

City  
DALLASState  
TXZip Code  
75252-5010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1041.02

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731649**

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLINGS, EDWARD, JOSEPH, MR.,**

Mailing Address 620 WADE AVE UNIT 502

City  
RALEIGHState  
NCZip Code  
27605-3293FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

490.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733153**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

695.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5711 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HINKLE, JAMES, L., MR.,**Mailing Address 8100 CLYO RD  
# 218City  
DAYTONState  
OHZip Code  
45458-2720FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734422

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HINTZ, DENNIS, W., MR.,**

Mailing Address 1087 JOHANNA DR.

City  
BALLWINState  
MOZip Code  
63021-6400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733315

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIRSCH, NATHAN, B., DR.,**

Mailing Address 6500 SW 85 STREET

City  
MIAMIState  
FLZip Code  
33143-7938FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOUTH MIAMI OB/GYN ASSOC LLCOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732541

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

209.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5712 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIRSCH, NATHAN, B., DR.,**

Mailing Address 6500 SW 85 STREET

City  
MIAMIState  
FLZip Code  
33143-7938FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOUTH MIAMI OB/GYN ASSOC LLCOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732596**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HITE, SUSAN, , ,**

Mailing Address 3290 POPLAR DR.

City  
LAWRENCEVILLEState  
GAZip Code  
30044-4131FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734710**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOAR, NANCY, L., ,**

Mailing Address 73 S UTAH AVE.

City  
NEWARKState  
OHZip Code  
43055-3416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

298.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735980**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

229.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5713 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOBBS, GAYLE, , MRS.,**

Mailing Address 1 VOLK TER

City  
GREAT FALLSState  
MTZip Code  
59405-4128FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733148**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOBBS, GAYLE, , MRS.,**

Mailing Address 1 VOLK TER

City  
GREAT FALLSState  
MTZip Code  
59405-4128FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734778**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOBLIT, SUSAN, , ,**

Mailing Address 2193 1900TH AVENUE

City  
ATLANTAState  
ILZip Code  
61723-9123FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

332.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732142**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

127.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5714 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOBSON, MARY, , ,**

Mailing Address 340 PEACHTREE CIR

City  
RINGGOLDState  
GAZip Code  
30736-6743FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731596**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HODGES, WILLIAM, , ,**

Mailing Address 9681 PLUM CREEK RD

City  
SEALYState  
TXZip Code  
77474-7839FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733079**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOFF, JOHN, , ,**

Mailing Address 2201 W. SINTO

City  
SPOKANEState  
WAZip Code  
99201-2946FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

379.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735812**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5715 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOGG, THERESA, , ,**

Mailing Address 1939 CARRAWAY ST

City  
BIRMINGHAMState  
ALZip Code  
35235-1948FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732290

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLOWAY, NAN, , ,**

Mailing Address 11588 VIA RANCHO SAN DIEGO

City  
EL CAJONState  
CAZip Code  
92019-5277FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733497

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLMES, CAROLYN, , ,**

Mailing Address 4309 LORREN DRIVE

City  
FREMONTState  
CAZip Code  
94536-7334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734844

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

235.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5716 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLMES, DON, , ,**

Mailing Address 24051 HACKBERRY CREEK CRK

City  
KATYState  
TXZip Code  
77494-2865FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.42

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733674**

Amount of Each Receipt this Period

114.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLMES, NED, , ,**

Mailing Address 55 WAUGH DR., STE. 1111

City  
HOUSTONState  
TXZip Code  
77007-5837FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOLMES INVESTMENTS, INCOccupation (for Individual)  
MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736627**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLMES, SANDRA, , ,**

Mailing Address P.O. BOX 6905

City  
LAGUNA NIGUELState  
CAZip Code  
92607-6905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

577.78

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733918**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

365.01



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5717 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLMES, SANDRA, , ,**

Mailing Address P.O. BOX 6905

City  
LAGUNA NIGUELState  
CAZip Code  
92607-6905FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733923

Amount of Each Receipt this Period

0.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLTEN, JAMES, J., MR.,**

Mailing Address 4003 CHESTNUT OAK DR

City  
SMITHTONState  
ILZip Code  
62285-3741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1366.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732881

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLTEN, JAMES, J., MR.,**

Mailing Address 4003 CHESTNUT OAK DR

City  
SMITHTONState  
ILZip Code  
62285-3741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1366.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735831

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

87.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5718 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLTSCRAW, LARRY, L., MR.,**

Mailing Address 5490 W. QUAIL AV.

City  
GLENDALEState  
AZZip Code  
85308-9130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734989**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HORAN, DONALD, , ,**

Mailing Address P.O. BOX 41

City  
JOHNSONState  
NYZip Code  
10933-0041FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731704**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOREJS, CHARLES, F., MR., JR.**

Mailing Address 35 LA CROSSE DR.

City  
MORGAN HILLState  
CAZip Code  
95037-5637FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

334.95

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734840**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5719 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HORNBECK, JAMIE, , ,**

Mailing Address 1491 MARY LOUISE ROAD

City  
DE WITTState  
ARZip Code  
72042-2996FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HORNBECK GRAINOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735458**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HORVATH, LINDA, , ,**

Mailing Address P.O. BOX 34688

City  
INDIANAPOLISState  
INZip Code  
46234-0688FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

745.41

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732453**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HORVATH, LINDA, , ,**

Mailing Address P.O. BOX 34688

City  
INDIANAPOLISState  
INZip Code  
46234-0688FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

745.41

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732816**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5720 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOWARD, BOBBY, , ,**

Mailing Address 3333 SWINDELL RD

City  
PLANT CITYState  
FLZip Code  
33565-2659FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735229**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HRUZA, VIRGINIA, , ,**

Mailing Address 1 WALKING DIAMOND DRIVE

City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1532.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731855**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBER, SCOTT, E., MR.,**

Mailing Address 82 FOXFIRE LN

City  
LEWISBERRYState  
PAZip Code  
17339-9337FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TSELVES RESEARCHOccupation (for Individual)  
ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

388.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733095**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

137.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5721 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUGHES, THEO, , ,**

Mailing Address 5502 GLENLIVET PL

City  
GREENVILLEState  
TXZip Code  
75402-4204FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733225**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUNT, GRAHAM, , ,**

Mailing Address 4950 CENTRAL APT 1101

City  
KANSAS CITYState  
MOZip Code  
64112-2589FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733107**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUTCHISON, ELAINE, W., ,**

Mailing Address 4543 E. ANAHEIM STREET

City  
LONG BEACHState  
CAZip Code  
90804-3119FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PARAGON EQUITIESOccupation (for Individual)  
MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732167**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

256.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5722 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUTCHINSON, ROBERT, , MR.,**

Mailing Address 808 CRIMSON RIDGE TRL

City  
FUQUAY VARINAState  
NCZip Code  
27526-2718FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736274**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HYDRICK, MIKE, N., MR.,**

Mailing Address 216 E LAKE DR.

City  
BRANDONState  
MSZip Code  
39047-6332FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SOUTHERN STATES CONSTRUCTIONOccupation (for Individual)  
BUILDING CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736277**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ILACQUA, BARBARA, ESPOSITO, MS.,**Mailing Address 1026 BENZ AVENUE  
202City  
CINCINNATIState  
OHZip Code  
45238-4406FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1049.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734152**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5723 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IREDALE, NANCY, L., MS.,**

Mailing Address P.O. BOX 5084

City  
INCLINE VILLAGEState  
NVZip Code  
89450-5084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734449**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IVERS, DONALD, , MR.,**

Mailing Address 1511 PAUL SPRING PARKWAY

City  
ALEXANDRIAState  
VAZip Code  
22308-1143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

723.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731744**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IVERSON, MARC, M., MR.,**

Mailing Address 5200 BEVINGTON PLACE

City  
CHARLOTTEState  
NCZip Code  
28277-5504FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1301.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732204**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

201.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5724 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IVERSON, MARC, M., MR.,**

Mailing Address 5200 BEVINGTON PLACE

City  
CHARLOTTEState  
NCZip Code  
28277-5504FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1301.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732301**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IVERSON, MARC, M., MR.,**

Mailing Address 5200 BEVINGTON PLACE

City  
CHARLOTTEState  
NCZip Code  
28277-5504FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1301.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733411**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IVERSON, MARC, M., MR.,**

Mailing Address 5200 BEVINGTON PLACE

City  
CHARLOTTEState  
NCZip Code  
28277-5504FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1301.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733536**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

184.94



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5725 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IZZO, STEPHEN, K., MR.,**

Mailing Address 2730 SUMMIT DR.

City  
GLENVIEWState  
ILZip Code  
60025-7633FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ZONATHERMOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734945**

Amount of Each Receipt this Period

57.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACOBS, JEAN, K., ,**

Mailing Address 1141 STEAMBOAT RUN ROAD

City  
SHEPHERDSTOWNState  
WVZip Code  
25443-4132FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733482**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAINDL, JOHN, , ,**

Mailing Address 3150 COFFEETOWN ROAD

City  
OREFIELDState  
PAZip Code  
18069-2511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735655**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

341.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5726 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736763

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736780

Amount of Each Receipt this Period

13.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736782

Amount of Each Receipt this Period

12.49

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5727 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAMES, RUTH, , ,**

Mailing Address 875 E FLANNER RD

City  
MOSINEEState  
WIZip Code  
54455-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736784**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAVIER, FLORDELINA, , ,**

Mailing Address 7566 EASTHILL DR

City  
SAN DIEGOState  
CAZip Code  
92114-3343FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734665**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAVIER, FLORDELINA, , ,**

Mailing Address 7566 EASTHILL DR

City  
SAN DIEGOState  
CAZip Code  
92114-3343FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734687**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

21.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5728 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAVIER, FLORDELINA, , ,**

Mailing Address 7566 EASTHILL DR

City  
SAN DIEGOState  
CAZip Code  
92114-3343FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.81

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734691**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAVIER, FLORDELINA, , ,**

Mailing Address 7566 EASTHILL DR

City  
SAN DIEGOState  
CAZip Code  
92114-3343FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.81

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734692**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JEWETT, STEVEN, , ,**

Mailing Address 31896 BIRCHWOOD DRIVE

City  
LAKE ELSINOREState  
CAZip Code  
92532-2628FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1107.60

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733276**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5729 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOENSEN, MARILYN, , ,**

Mailing Address 2602 YORKSHIRE ST.

City  
AMESState  
IAZip Code  
50010-1147FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734095**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, ANN, W., MRS.,**

Mailing Address 444 POLIHALE WAY

City  
NAPLESState  
FLZip Code  
34114-8351FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733744**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, BERNICE, , ,**Mailing Address 55 MELROY AVE  
APT 215City  
BUFFALOState  
NYZip Code  
14218-1660FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736433**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5730 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNSON, DOYLE, , ,

Mailing Address 11648 CAMINITO CORRIENTE

City  
SAN DIEGOState  
CAZip Code  
92128-4540FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FAMILY PHYSICIAN M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733300

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, DOYLE, , ,

Mailing Address 11648 CAMINITO CORRIENTE

City  
SAN DIEGOState  
CAZip Code  
92128-4540FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FAMILY PHYSICIAN M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733560

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, JAMES, D., MR.,

Mailing Address P.O. BOX 5897

City  
KINGWOODState  
TXZip Code  
77325-5897FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE AGENT & AGENCY OWN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734461

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

123.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5731 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSTON, SANDRA, , ,**

Mailing Address 32 NEW VILLAGE LN

City  
SMYRNAState  
DEZip Code  
19977-4715FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.48

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734707**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, TIMOTHY, , ,**

Mailing Address 419 RAMBLE

City

HOT SPRINGS NATION

State

AR

Zip Code

71901-3080

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732281**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON MORTON, VALERIE, , ,**

Mailing Address 3391 EAST ORANGE BLOSSOM WAY

City

ONTARIO

State

CA

Zip Code

91761-3926

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2782.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731544**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5732 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON MORTON, VALERIE, , ,**

Mailing Address 3391 EAST ORANGE BLOSSOM WAY

City  
ONTARIOState  
CAZip Code  
91761-3926FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2782.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733676

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, ALFRED, D., MR., JR.**

Mailing Address 616 LYNN AVE

City  
ANTIOCHState  
CAZip Code  
94509-5030FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732146

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, DEBBIE, , ,**

Mailing Address 3516 CABBAGE PALM WAY

City  
LOXAHATCHEEState  
FLZip Code  
33470-2441FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734811

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

299.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5733 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, FRANK, , , III**

Mailing Address 457 AVONDALE DR.

City  
BRANSONState  
MOZip Code  
65616-3485FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731928

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, FRANK, , , III**

Mailing Address 457 AVONDALE DR.

City  
BRANSONState  
MOZip Code  
65616-3485FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734491

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735620

Amount of Each Receipt this Period

37.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

137.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5734 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2025

**Transaction ID : SA11A.27736030**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, MARY, G., MS.,**

Mailing Address 7323 SNOWDEN RD

City  
SAN ANTONIOState  
TXZip Code  
78240-4721FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1408.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2025

**Transaction ID : SA11A.27736307**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, STEVEN, , ,**

Mailing Address 39 PHEASANT RUN ROAD

City  
PLEASANTVILLEState  
NYZip Code  
10570-2512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2025

**Transaction ID : SA11A.27732248**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

191.16

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5735 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, STEVEN, , ,**

Mailing Address 39 PHEASANT RUN ROAD

City  
PLEASANTVILLEState  
NYZip Code  
10570-2512FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732738**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOYNER, JERRY, , ,**

Mailing Address 8705 FALCON VIEW DR

City  
MCKINNEYState  
TXZip Code  
75072-6701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734293**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAAKOUR, MUSTAFA, , ,**

Mailing Address 117 SYLVAN WAY

City  
NEW HARTFORDState  
NYZip Code  
13413-3436FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LABCORPOccupation (for Individual)  
PATHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733967**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

362.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5736 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAIAFAS, ANDREW, , ,**

Mailing Address 200 BISCQYNE BOULEVARD WAY APT 530

City  
MIAMIState  
FLZip Code  
33131-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MARATHON AIRLINESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

876.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732775**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734038**

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734039**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

310.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5737 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734042

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734043

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734047

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5738 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734054

Amount of Each Receipt this Period

39.60

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734077

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734098

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.04

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5739 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANDT, ALICIA, , ,**

Mailing Address 2224 S CLAY LN

City  
WICHITAState  
KSZip Code  
67207-6320FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3243.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734101**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANTNER, JEFFREY, , ,**

Mailing Address 200 TULIPHILL ROAD

City  
TEMPLEState  
PAZip Code  
19560-9401FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CJKANT RESOURCE GROUP INCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736540**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAPETANAKIS, GEORGE, J., ,**

Mailing Address 9801TANDEM CT

City  
RALEIGHState  
NCZip Code  
27615-1553FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735558**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5740 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAUFFMAN, CLAUDIA, , MS.,**

Mailing Address 3607 HONEYWOOD DRIVE

City  
JOHNSON CITYState  
TNZip Code  
37604-1480FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.65

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735839**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEARNS, RICHARD, , ,**

Mailing Address 13576 EAGLE POINTE DR

City  
PORT CHARLOTTEState  
FLZip Code  
33953-4674FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.26

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735139**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734675**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.47



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5741 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEATON, MARGY, , MS.,**

Mailing Address PO BOX 551

City  
CONROEState  
TXZip Code  
77305-0551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1614.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736178**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733066**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEEFER, NANCY, S., MS.,**

Mailing Address 67 FAIR OAKS DR.

City  
SAINT LOUISState  
MOZip Code  
63124-1521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1794.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734559**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5742 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KELEDJIAN, EDWARD, , ,**

Mailing Address 29 KINGSBOROUGH CV

City  
INVERNESSState  
ILZip Code  
60010-5432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732038**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KELEDJIAN, EDWARD, , ,**

Mailing Address 29 KINGSBOROUGH CV

City  
INVERNESSState  
ILZip Code  
60010-5432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733474**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KELEDJIAN, EDWARD, , ,**

Mailing Address 29 KINGSBOROUGH CV

City  
INVERNESSState  
ILZip Code  
60010-5432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

543.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734395**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5743 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KELEDJIAN, EDWARD, , ,**

Mailing Address 29 KINGSBOROUGH CV

City  
INVERNESSState  
ILZip Code  
60010-5432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735476**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KELLY, ERNEST, G., MR., JR.**

Mailing Address 219 ANGELUS

City  
MEMPHISState  
TNZip Code  
38112-5201FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

965.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735460**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEMP, KIRKLAND, , ,**

Mailing Address 2188 WASHINGTON AVE

1

City  
BRONXState  
NYZip Code  
10457-2589FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734090**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5744 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KENDRICK, WILLIAM, , ,**

Mailing Address 100 CRESCENT AVE

City  
GREENVILLEState  
SCZip Code  
29605-2813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733844**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KENNEDY, BRUCE, , ,**

Mailing Address 11561AULDBURY WAY

City  
RALEIGHState  
NCZip Code  
27617-7847FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735670**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KENT, BRAD, , ,**

Mailing Address 1897 W SUTTON RD

City  
OTHELLOState  
WAZip Code  
99344-9048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

399.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731781**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5745 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KENT, BRAD, , ,**

Mailing Address 1897 W SUTTON RD

City  
OTHELLOState  
WAZip Code  
99344-9048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732151**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KERINS, MARY, , ,**

Mailing Address 127 74TH STREET

City  
NIAGARA FALLSState  
NYZip Code  
14304-4032FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735828**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEYES, BOB, , ,**

Mailing Address 1718 SHARPLESS RD

City  
JENKINTOWNState  
PAZip Code  
19046-1030FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734890**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.75

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5746 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KIBIZOFF, GARY, , ,**

Mailing Address 36 SOUTHWEST 11TH STREET

City  
DANIA BEACH

State  
FL

Zip Code  
33004-4223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALLCO LIFE

Occupation (for Individual)  
INSURANCE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27733694**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIELY, PETER, F., MR.,**

Mailing Address 8787 BAY COLONY DR.  
APT 302

City  
NAPLES

State  
FL

Zip Code  
34108-0781

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.46

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27736264**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KINCADE, ROBERT, A., MR.,**

Mailing Address 2550 UNIVERSITY AVE W

City  
SAINT PAUL

State  
MN

Zip Code  
55114-1052

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STONEBRIDGE CAPITAL ADVISORS

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

596.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27736380**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

272.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5747 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KING, BRENT, , ,**

Mailing Address 6243 PEACOCK RUN

City  
LAKELANDState  
FLZip Code  
33809-5654FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735306**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KING, MICHAEL, , ,**

Mailing Address 13719 EASTBOURNE

City  
HOUSTONState  
TXZip Code  
77034-5316FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736057**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KIRBY, RICHARD, C., MR., IV**

Mailing Address 4126 NEFF LAKE RD

City  
BROOKSVILLEState  
FLZip Code  
34601-8101FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

398.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736495**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

247.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5748 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KIRKMAN, TERESA, , ,**

Mailing Address 20 GLASTONBURY CV

City  
EADSState  
TNZip Code  
38028-3572FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
AUTO BODY SHOP OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732076**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIRKWOOD, DAVID, , ,**

Mailing Address 601 LEEWARD LOOP

City  
COVINGTONState  
LAZip Code  
70433-7934FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DAVID KIRKWOODOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.16

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736699**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLEMENTIK, DAVID, , ,**

Mailing Address 1206 GRAHAM AVE

City  
WINDBERState  
PAZip Code  
15963-1706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736432**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

254.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5749 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLIPPENSTEIN, GEORGE, , ,**

Mailing Address 40 MADISON ST, STE 309

City  
DENVERState  
COZip Code  
80206-5446FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735752**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KLOCK, MARY, , ,**

Mailing Address 5500 N 67TH PL

City  
PARADISE VALLEYState  
AZZip Code  
85253-5923FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.34

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733941**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNOTTS, MIKE, , ,**

Mailing Address 2450 CLEARBROOK WAY

City  
HAUGHTONState  
LAZip Code  
71037-7476FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HIGGINBOTHAMOccupation (for Individual)  
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

990.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734672**

Amount of Each Receipt this Period

495.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

779.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5750 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNOX, DONNA, , ,**

Mailing Address 5055 W C30A # 1016

City  
SANTA ROSA BEACHState  
FLZip Code  
32459-4373FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732207

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNUITSEN, SHIRLEY, , ,**

Mailing Address 1149 STANTON SHADOW LN

City  
APOPKAState  
FLZip Code  
32712-5493FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734046

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOBES, GENE, , ,**

Mailing Address 441 DEER MEADOW BLVD

City  
CIBOLOState  
TXZip Code  
78108-3112FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736403

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5751 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KONECKO, THELMA, , ,**

Mailing Address 750 CLARK COVE

City  
BUDAState  
TXZip Code  
78610-3151FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ATX BUSINESS SERVICES, INCOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735062**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOONTZ, LINDA, , ,**

Mailing Address 155 PARKLAND DR

City

SALISBURY

State

NC

Zip Code

28146-8205

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736360**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KORENEK, LAWRENCE, , ,**

Mailing Address 421FRELS

City

EL CAMPO

State

TX

Zip Code

77437-2063

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BANKEROccupation (for Individual)  
LENDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734766**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

149.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5752 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KORMYLO, KENT, , MR.,**

Mailing Address 4751 E 3900 N

City  
EDENState  
UTZip Code  
84310-1719FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.10

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735006**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRAUSE, CAROLYN, , ,**Mailing Address 2100 CIRCLE DR.  
APT 221City  
SCOTTSBLUFFState  
NEZip Code  
69361-1778FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER/FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.06

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733715**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUHN, ROBERT, , ,**

Mailing Address 3718 LANGTRY DR

City  
AMARILLOState  
TXZip Code  
79109-3926FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

936.20

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735885**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5753 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUNSTMANN, MARTIN, P., ,**

Mailing Address 10 PEETIES PATH

City  
DAMASCUSState  
PAZip Code  
18415-3636FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731841**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KURZET, ANNE, L., MS.,**

Mailing Address 33762 VALLE ROAD

City

SAN JUAN CAPISTRAN

State

CA

Zip Code

92675-4816

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733121**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KURZET, ANNE, L., MS.,**

Mailing Address 33762 VALLE ROAD

City

SAN JUAN CAPISTRAN

State

CA

Zip Code

92675-4816

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

709.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733696**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

119.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5754 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUSHINER, GREGG, , ,**

Mailing Address 6732 BADGER LAKE CT

City  
NORTH LAS VEGASState  
NVZip Code  
89084-2388FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731715**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KYGER, VIKKI, , ,**

Mailing Address 923 DOVER GLEN DRIVE

City  
NORTH LAS VEGASState  
NVZip Code  
89031-1905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734867**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LACKAMP, ROBERT, , ,**

Mailing Address 606 N LEONARD RD

City  
SAINT JOSEPHState  
MOZip Code  
64506-4025FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

246.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734847**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

179.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5755 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAHAM, JAMIL, , ,**

Mailing Address 6702 BALMORAL OVERLOOK

City  
NEW MARKETState  
MDZip Code  
21774-6952FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735556

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LALONDE, RICHARD , , ,**

Mailing Address 3332 NW 47TH CT

City  
OCALAState  
FLZip Code  
34482-8322FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

938.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731974

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAMB, FRANK, , ,**

Mailing Address 2346WEST COLLEGE AVE

City  
SANTA ROSAState  
CAZip Code  
95401-4951FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732943

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5756 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAMB, FRANK, , ,**

Mailing Address 2346WEST COLLEGE AVE

City  
SANTA ROSAState  
CAZip Code  
95401-4951FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732973**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAMPING, DOUG, R., MR.,**

Mailing Address 1433 SOUTH 35 EAST

City  
FARMINGTONState  
UTZip Code  
84025-2004FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UDCOccupation (for Individual)  
CO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732100**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANCASTER, WILLIAM, , ,**

Mailing Address 5991 EAST PRINCETON AVENUE

City  
CHERRY HILLS VILLAState  
COZip Code  
80111-1030FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GMT EXPLORATIONOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735870**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

169.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5757 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANDGRAF, JOHN, , ,**

Mailing Address 521 NORTH TEXAS AVENUE

City  
ODESSAState  
TXZip Code  
79761-5131FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LCAOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735060

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANG, HELEN, L., MS.,**

Mailing Address 28 HILLSIDE RD

City  
BEACONState  
NYZip Code  
12508-4129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733462

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANPHEAR, JEFF, , ,**

Mailing Address P.O. BOX 488

City  
JEWETT CITYState  
CTZip Code  
06351-0488FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOREASTEROccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732936

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

189.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5758 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANTZ, IRENE, L., ,**

Mailing Address 8175 W FARM ROAD 168

City  
REPUBLICState  
MOZip Code  
65738-9327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735651**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANTZ, IRENE, L., ,**

Mailing Address 8175 W FARM ROAD 168

City  
REPUBLICState  
MOZip Code  
65738-9327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736261**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LARIS, RUDY, , ,**

Mailing Address 111 VACHERIE ST

City  
LOCKPORTState  
LAZip Code  
70374-2534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

412.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736193**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5759 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LARUE, PATRICIA, , ,**

Mailing Address 3137-B GOLDEN YEARS HOMESTEAD DR

City  
NEW HAVENState  
INZip Code  
46774-3003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735178

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LARUE, PATRICIA, , ,**

Mailing Address 3137-B GOLDEN YEARS HOMESTEAD DR

City  
NEW HAVENState  
INZip Code  
46774-3003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735920

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAYCOCK, JAMES, , ,**

Mailing Address 7628 GANNON AVENUE

City  
UNIVERSITY CITYState  
MOZip Code  
63130-2819FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENTERPRISEOccupation (for Individual)  
PART TIME DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735995

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5760 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAYNE, GLORIA, C., ,**

Mailing Address 1766 BAY ISLE DR.

City  
POINT PLEASANT BORState  
NJZip Code  
08742-5212FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733009**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAYO, LEWIS, DANIEL, MR., SR.**

Mailing Address 2316 W VINE ST

City  
LODIState  
CAZip Code  
95242-3727FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
H&R BLOCK TAX GROUPOccupation (for Individual)  
ENROLLED AGENT/TAX PREPARATI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735184**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LE SESNE, CAROL, , ,**

Mailing Address 1096 EVERGREEN TRAIL

City  
HALIFAXState  
VAZip Code  
24558-3300FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734652**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5761 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEAHY, PATRICIA, , ,**

Mailing Address 750 WETMORE HEIGHTS

City  
COLORADO SPRINGSState  
COZip Code  
80906-8608FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733697

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEAVENS, CAMERON, , ,**

Mailing Address 979 SYIDA DR.

City  
PACIFIC GROVEState  
CAZip Code  
93950-5327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CAMERON LEAVENS

Occupation (for Individual)

LAND CARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734093

Amount of Each Receipt this Period

15.62

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEAVENS, CAMERON, , ,**

Mailing Address 979 SYIDA DR.

City  
PACIFIC GROVEState  
CAZip Code  
93950-5327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CAMERON LEAVENS

Occupation (for Individual)

LAND CARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

566.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734236

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.71

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5762 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEAVENS, CAMERON, , ,**

Mailing Address 979 SYIDA DR.

City  
PACIFIC GROVEState  
CAZip Code  
93950-5327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CAMERON LEAVENSOccupation (for Individual)  
LAND CARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736710**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732400**

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732415**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

161.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5763 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734648**

Amount of Each Receipt this Period

18.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735368**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEE, KENNETH, K., MR.,**

Mailing Address 222 THATCHER LN

City  
FOSTER CITYState  
CAZip Code  
94404-3949FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1767.66

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735388**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5764 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEIGH, JOHN, , MR.,**

Mailing Address 2926 LAUREL PARK HWY

City  
HENDERSONVILLEState  
NCZip Code  
28739-8980FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732724

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEN, WON, , MR.,**

Mailing Address 19074 111TH RD

City  
SAINT ALBANSState  
NYZip Code  
11412-2017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2864.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734283

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LESAFFRE, MARY, , ,**

Mailing Address 2186 OCEAN BLVD

City  
RYEState  
NHZip Code  
03870-2741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5080.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735644

Amount of Each Receipt this Period

990.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1302.30



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5765 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWISSMITH, ROSALIND, , MRS.,**

Mailing Address 503 CYPRESS LINKS WAY

City  
TAYLORSState  
SCZip Code  
29687-6473FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735630**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731825**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

967.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735936**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.53

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5766 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIKE, LINDA, E., MRS.,**

Mailing Address 12626 E 1ST RUN ROAD

City  
MONROE CITYState  
INZip Code  
47557-7130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735949

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LINDENBERG, LARRY, , MR.,**

Mailing Address 846 DOERFLER DR.

City  
KIMBERLYState  
WIZip Code  
54136-2304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731836

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINDENBERG, LARRY, , MR.,**

Mailing Address 846 DOERFLER DR.

City  
KIMBERLYState  
WIZip Code  
54136-2304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

592.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733406

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

96.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5767 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINDSEY, SETH, , ,**

Mailing Address 2636 BLACK FIR COURT

City  
RESTONState  
VAZip Code  
20191-4208FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736746**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LINDSEY, TOMMY, , MR.,**

Mailing Address 11222 LONG BRANCH DR.

City  
AUSTINState  
TXZip Code  
78736-6505FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734126**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LONG, LAURIE, , ,**

Mailing Address 103 EAST CHEYENNE ROAD

City  
COLORADO SPRINGSState  
COZip Code  
80906-2533FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

801.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732835**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

215.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5768 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOUGHNEY, ROBERT, D., MR.,**

Mailing Address 2316 GOLDSMITH ST

City  
HOUSTONState  
TXZip Code  
77030-1130FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LOUGHNEY CONSULTING INC.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735134**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOY, BARRY, , ,**

Mailing Address 11 FAIRWAY DR

City  
NATCHEZState  
MSZip Code  
39120-9589FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734557**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733251**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

295.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5769 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733352**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUDER, JAMES, , ,**

Mailing Address 142 DELANEY PARK AVE

City  
DAVENPORTState  
FLZip Code  
33897-6419FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736281**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUNDIN, LEROY, , ,**

Mailing Address 28 CHATHAM CT

City  
CROSSVILLEState  
TNZip Code  
38558-2622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.57

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.2773444**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5770 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUNDIN, LEROY, , ,**

Mailing Address 28 CHATHAM CT

City  
CROSSVILLEState  
TNZip Code  
38558-2622FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.57

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733625**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUPO, LOUIS, , ,**

Mailing Address 447 BLUE POINT RD.

City  
FARMINGVILLEState  
NYZip Code  
11738-1811FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736304**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUTE, TERRY, , ,**

Mailing Address 318 LAKE ST.

City  
BRIDGE CITYState  
TXZip Code  
77611-4322FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MCFADDIN WARD INC.Occupation (for Individual)  
SECURITY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731980**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5771 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUTE, TERRY, , ,**

Mailing Address 318 LAKE ST.

City  
BRIDGE CITYState  
TXZip Code  
77611-4322FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MCFADDIN WARD INC.Occupation (for Individual)  
SECURITY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.94

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732075**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUTSCHG, VIVIAN, , MRS.,**

Mailing Address 2400 MAPLE ST.

City  
CHADRONState  
NEZip Code  
69337-9369FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.80

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731608**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUZAJ, NDRICIM, , ,**

Mailing Address 6575 SEAMAN STREET

City  
SAN DIEGOState  
CAZip Code  
92120-2629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LUZAJ TILE INCOccupation (for Individual)  
TILE INSTALLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732317**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

115.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5772 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUZAJ, NDRICIM, , ,**

Mailing Address 6575 SEAMAN STREET

City  
SAN DIEGOState  
CAZip Code  
92120-2629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LUZAJ TILE INCOccupation (for Individual)  
TILE INSTALLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735800**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LYLES, RICHARD, A., ,**

Mailing Address 27211. MILLER. STREET

City  
PORT NECHESState  
TXZip Code  
77651-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733353**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MA, CAROL, , ,**

Mailing Address 3411 WALES COURT

City  
ROWLAND HEIGHTSState  
CAZip Code  
91748-5139FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.54

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736835**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

198.30



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5773 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MA, HOMER, , ,**

Mailing Address 1819 HAPP RD

City  
NORTHBROOKState  
ILZip Code  
60062-5640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735889**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MA, HOMER, , ,**

Mailing Address 1819 HAPP RD

City  
NORTHBROOKState  
ILZip Code  
60062-5640FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1068.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736584**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACARTHUR, ALEXANDER, D., MR.,**

Mailing Address 321 KNOT WAY

City  
DELANDState  
FLZip Code  
32724-6253FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

206.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733524**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

248.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5774 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACHADO, LEONARD, , ,**

Mailing Address 21520 G YORBA LINDA BLVD

City  
YORBA LINDAState  
CAZip Code  
92887-3764FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733187**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACKEY, BERNARD, , ,**

Mailing Address PO BOX 241068

City  
OMAHAState  
NEZip Code  
68124-5068FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735358**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACOMBER, RICHARD, , ,**

Mailing Address 3727 SE 17TH AVENUE

City  
CAPE CORALState  
FLZip Code  
33904-5068FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734655**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5775 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACUMBER, THOMAS, , ,**

Mailing Address 443 SLATE STREET

City  
CHESAPEAKEState  
VAZip Code  
23322-1705FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731792**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACUMBER, THOMAS, , ,**

Mailing Address 443 SLATE STREET

City  
CHESAPEAKEState  
VAZip Code  
23322-1705FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732981**

Amount of Each Receipt this Period

90.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MADDEN, STEVE, , ,**

Mailing Address 16890 NORTH RIVER SHORES ROAD

City  
NORTHPORTState  
ALZip Code  
35475-2519FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

353.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734160**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5776 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MADDOCKS, WILLIAM, , ,**

Mailing Address PO BOX 908

City  
SCHERERVILLEState  
INZip Code  
46375-0908FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732383**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MADER, PATRICIA, M., MRS.,**

Mailing Address 1710 HUDSON CIR

City  
GRAND ISLANDState  
NEZip Code  
68801-7473FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732636**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAGRUDER, SHERYL, , ,**

Mailing Address 576 CONCORD LANE

City  
KALISPELLState  
MTZip Code  
59901-5111FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1103.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733776**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5777 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAGUIRE, JOANNE, , MS.,**

Mailing Address 144 E 84TH ST

City  
NEW YORKState  
NYZip Code  
10028-2004FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734338**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAKI, NEIL, J., DR.,**

Mailing Address 103 W 4TH ST

City  
THIBODAUXState  
LAZip Code  
70301-3107FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736518**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MALEY, LAVERNE, , ,**

Mailing Address P.O. BOX 519

City  
CARLSBADState  
NMZip Code  
88221-0519FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VISION ENERGY, INC.Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732807**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1085.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5778 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733073

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735609

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2108.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736224

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5779 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANSOUR, ALFRED, A., DR.,**

Mailing Address 3771 BELLAIRE BLVD

City  
HOUSTONState  
TXZip Code  
77025-1206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ACCESS RADIOLOGYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.19

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735973**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARIETTA, JAMES, , ,**

Mailing Address 4 PARK PLAZA,

City  
IRVINEState  
CAZip Code  
92614-8560FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WZWLHOccupation (for Individual)  
ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.37

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732106**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARKOVIC, ILIJA, M., MR.,**

Mailing Address 11187 E OBERLIN WAY

City  
SCOTTSDALEState  
AZZip Code  
85262-7416FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.26

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733659**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

231.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5780 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARSH, ALANA, , ,**

Mailing Address 4275 PANORAMIC VIEW DRIVE

City  
MARYVILLEState  
TNZip Code  
37804-3982FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732153**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARSHALL, ROBERT, , ,**

Mailing Address 1886 SPRUCE CREEK BLVD

City  
PORT ORANGEState  
FLZip Code  
32128-6780FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

793.10

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732728**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARSHALL, ROBERT, , ,**

Mailing Address 1886 SPRUCE CREEK BLVD

City  
PORT ORANGEState  
FLZip Code  
32128-6780FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

793.10

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732841**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.44



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5781 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, BARBARA, , ,**

Mailing Address 607 W CRAFT ST

City  
ROBINSONState  
ILZip Code  
62454-1133FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734699

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTINO, BOB, , ,**

Mailing Address P.O. BOX 1101

City  
SKIPPACKState  
PAZip Code  
19474-1101FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731676

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, BOWIE, G., MR.,**

Mailing Address 2002 GARRETT DR. NW

City  
WILSONState  
NCZip Code  
27896-1584FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735894

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

244.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5782 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, FRED, , ,**

Mailing Address 9146 N 15TH WAY

City  
SCOTTSDALEState  
AZZip Code  
85259-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732173**

Amount of Each Receipt this Period

34.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTINEZ, HUMBERTO, , ,**

Mailing Address 121 BLUEBIRD AVE

City  
MCALLENState  
TXZip Code  
78504-2214FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734513**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, LARRY, J., MR.,**

Mailing Address 2102 FOREST MOUNTAIN RD

City  
PRESCOTTState  
AZZip Code  
86303-6910FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LARRY J. MARTIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734629**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5783 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, LARRY, J., MR.,**

Mailing Address 2102 FOREST MOUNTAIN RD

City  
PRESCOTTState  
AZZip Code  
86303-6910FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LARRY J. MARTIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.88

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735929**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASON, SUSAN, M., MS.,**

Mailing Address 8968 BRAEMORE HTS.

City  
COLORADO SPRINGSState  
COZip Code  
80927-9706FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.60

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732252**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASTERS, BARBARA, , ,**

Mailing Address 3405 W 23 STREET

City  
GREELEYState  
COZip Code  
80634-7503FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NCMC -HOSPITALOccupation (for Individual)  
PBX-OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

319.48

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735703**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.36

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5784 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASTRO, MABEL, , ,**

Mailing Address 4616 PRAIRIE POINT BOULEVARD

City  
KISSIMMEEState  
FLZip Code  
34746-6364FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

889.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736321**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATHEWS, TIMOTHY, , ,**

Mailing Address 388 PALOMARES AVENUE

City  
VENTURAState  
CAZip Code  
93003-1737FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732556**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATHEWS, TIMOTHY, , ,**

Mailing Address 388 PALOMARES AVENUE

City  
VENTURAState  
CAZip Code  
93003-1737FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

727.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732699**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5785 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATTHEWS, ANNETTA, , ,**

Mailing Address 100 SAGART LN

City  
NICHOLASVILLEState  
KYZip Code  
40356-9735FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

884.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736748**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATTHEWS, ANNETTA, , ,**

Mailing Address 100 SAGART LN

City  
NICHOLASVILLEState  
KYZip Code  
40356-9735FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

884.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736749**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAXWELL, TAYLOR, H., MR.,**

Mailing Address 9121 SOUTHMONT CV206

City  
FORT MYERSState  
FLZip Code  
33908-6308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

248.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733800**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

243.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5786 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAXWELL, TAYLOR, H., MR.,**

Mailing Address 9121 SOUTHMONT CV206

City  
FORT MYERSState  
FLZip Code  
33908-6308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736795**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAZZONE, MARCO, L., MR.,**

Mailing Address 10694 KNIGHTS WAY

City  
NORTH ROYALTONState  
OHZip Code  
44133-1998FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AMERICAN HERITAGE FINANCIAL ADVISORSOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735041**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCAULIFFE, JOHN, , ,**

Mailing Address 5 WEBSTER RD

City  
SOMERSETState  
NJZip Code  
08873-2214FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736343**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

151.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5787 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCBEE, RICHARD, , ,**

Mailing Address 272 VALLEY VIEW LANE

City  
INDIAN SPRINGSState  
ALZip Code  
35124-3635FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MOVEDADDYOccupation (for Individual)  
TRUCKING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735474**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCANN, MIKE, , ,**

Mailing Address 7646 STRAUSSER ST NW

City  
NORTH CANTONState  
OHZip Code  
44720-5256FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734587**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCOY, CHER, , MS.,**

Mailing Address 43 PASSAMAQUODDY TRAIL

City  
LEXINGTONState  
VAZip Code  
24450-3626FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LEXINGTON PET CARE CENTEROccupation (for Individual)  
ANIMAL BEHAVIORIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

353.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731610**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

230.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5788 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCELREATH, JAMES, , ,**

Mailing Address 1701SHADYDIDE

City  
EAST LIVERPOOLState  
OHZip Code  
43920-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735111

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCELREATH, JAMES, , ,**

Mailing Address 1701SHADYDIDE

City  
EAST LIVERPOOLState  
OHZip Code  
43920-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735153

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCGAVOCK, VICKI, , ,**

Mailing Address 4004 109TH ST

City  
LUBBOCKState  
TXZip Code  
79423-0880FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

618.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734416

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.09



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5789 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCGAVOCK, VICKI, , ,**

Mailing Address 4004 109TH ST

City  
LUBBOCKState  
TXZip Code  
79423-0880FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.36

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734419**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCKEMIE, MYLES, , ,**

Mailing Address 16712 ROCKY RIDGE RD

City  
AUSTINState  
TXZip Code  
78734-1061FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
USAOccupation (for Individual)  
MARKETING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732708**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCMAHAN, HOWARD, C., MRS.,**

Mailing Address PO BOX 779

City  
OCILLAState  
GAZip Code  
31774-0779FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FAMILY PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

358.12

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732843**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5790 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOAState  
NVZip Code  
89411-1548FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731949

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOAState  
NVZip Code  
89411-1548FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731952

Amount of Each Receipt this Period

20.82

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOAState  
NVZip Code  
89411-1548FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731953

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

66.17

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5791 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCNAMARA, THOMAS, , ,**

Mailing Address 2501 GENOA ASPEN DRIVE

City  
GENOAState  
NVZip Code  
89411-1548FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731954**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNEIL, COLLIN, , ,**

Mailing Address 1701 HORSESHOE TRAIL

City

CHESTER SPRINGS

State

PA

Zip Code

19425-1814

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732990**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCPHERSON, JEFFREY, , ,**

Mailing Address 111 TAYLOR STREET

City

GRANBY

State

MA

Zip Code

01033-9522

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734746**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5792 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEADEN, THOMAS, , ,**

Mailing Address 24 ENGINE CREEK CT

City  
DURANGOState  
COZip Code  
81301-8593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731888

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEEHAN, JOAN, , ,**

Mailing Address 2874 GOLDEN GATE AVE

City  
SAN FRANCISCOState  
CAZip Code  
94118-4111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1962.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733949

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEEHAN, JOAN, , ,**

Mailing Address 2874 GOLDEN GATE AVE

City  
SAN FRANCISCOState  
CAZip Code  
94118-4111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1962.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734516

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5793 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MELENDEZ, LUIS, , ,**

Mailing Address 12TIRRELLST#2

City  
WORCESTERState  
MAZip Code  
01603-2653FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732808

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MENDOZA, ALFRED, , ,**

Mailing Address 606 AUGUSTA CT

City  
FULLERTONState  
CAZip Code  
92835-2769FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IDENTIGRAPHIXOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734798

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MENDOZA, ALFRED, , ,**

Mailing Address 606 AUGUSTA CT

City  
FULLERTONState  
CAZip Code  
92835-2769FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IDENTIGRAPHIXOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

354.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734881

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

161.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5794 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEREDITH, RANDY, , ,**

Mailing Address 266 BULLFINCH ROAD

City  
MOORESVILLEState  
NCZip Code  
28117-5407FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1978.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732210**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MERKEL, GREG, , ,**

Mailing Address 729 RT3

City  
GAMBRILLSState  
MDZip Code  
21054-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LEOSOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734228**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERTZ, PAUL, , MR.,**

Mailing Address 5 GALE AVE

City  
RIVER FORESTState  
ILZip Code  
60305-2009FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1740.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735043**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

196.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5795 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MERTZ, PAUL, , MR.,**

Mailing Address 5 GALE AVE

City  
RIVER FORESTState  
ILZip Code  
60305-2009FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.22

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735083**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MERTZ, PAUL, , MR.,**

Mailing Address 5 GALE AVE

City  
RIVER FORESTState  
ILZip Code  
60305-2009FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.22

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735122**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERTZ, PAUL, , MR.,**

Mailing Address 5 GALE AVE

City  
RIVER FORESTState  
ILZip Code  
60305-2009FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1740.22

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735144**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5796 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MERTZ, PAUL, , MR.,**

Mailing Address 5 GALE AVE

City  
RIVER FORESTState  
ILZip Code  
60305-2009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735165**

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MESSER, JIM, , ,**

Mailing Address 210 HOLMES ROAD

City  
SCARBOROUGHState  
MEZip Code  
04074-8410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736506**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. METKOVICH, GEORGE, , MR.,**

Mailing Address 2072 PHALAROPE COURT

City  
COSTA MESAState  
CAZip Code  
92626-4734FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735133**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5797 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. METZGER, AGNES, , ,**Mailing Address 888 PARK AVENUE  
2CCity  
NEW YORKState  
NYZip Code  
10075-0282FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1259.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731564

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. METZGER, AGNES, , ,**Mailing Address 888 PARK AVENUE  
2CCity  
NEW YORKState  
NYZip Code  
10075-0282FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1259.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731979

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEYERS-GLYDA, DONNA, , MS.,**

Mailing Address 7512 VALHALLA DRIVE

City  
MAUMEEState  
OHZip Code  
43537-9512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SERENITY REALTYOccupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735958

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5798 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MICHAEL, DAVID, CHRIS, MR.,**

Mailing Address 3406 MARYWOOD DR.

City  
SPRINGState  
TXZip Code  
77388-5176FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734774**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MICHAEL, DAVID, CHRIS, MR.,**

Mailing Address 3406 MARYWOOD DR.

City  
SPRINGState  
TXZip Code  
77388-5176FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736060**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MICHELS, MARY, E., MS.,**

Mailing Address 8001 BROOKS LOOP

City  
SPEARFISHState  
SDZip Code  
57783-6307FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733980**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5799 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIDDENDORF, JOHN, , ,**

Mailing Address P.O. BOX 1037

City  
LITTLE COMPTONState  
RIZip Code  
02837-0337FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732818**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIDDLETON, JAYNE, , ,**

Mailing Address 2420CREEKWOOD DR

City  
BATON ROUGEState  
LAZip Code  
70808-0115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734869**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIKULA, GAIL, , ,**

Mailing Address P.O. BOX 8

City  
HIRAMState  
OHZip Code  
44234-0008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

331.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732261**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

394.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5800 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIKULICH, JOHN, , , II**

Mailing Address 4120 PURPLE RIDGE CT

City  
LAS VEGASState  
NVZip Code  
89129-5484FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.18

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736396**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILES, GERALD, , ,**

Mailing Address P.O. BOX 9297

City  
CHARLESTONState  
WVZip Code  
25309-0297FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734679**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, BONNIE, F., ,**

Mailing Address 14 WILMINGTON WAY

City  
CONROEState  
TXZip Code  
77384-4777FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.08

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736622**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5801 OF 6441  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, DAVID, , ,**

Mailing Address PO. BOX 7675 106 ELDERBERRY LN

City  
MAMMOTH LAKESState  
CAZip Code  
93546-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732305**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, JAMES, E., ,**

Mailing Address 2235 DEXTER RD.

City  
AUBURN HILLSState  
MIZip Code  
48326-2307FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736544**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, LARRY, , ,**

Mailing Address 1235 ROSEDALE DR.

City  
MANSFIELDState  
OHZip Code  
44906-3534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
METRONOME MUSICOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

402.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733327**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5802 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, LARRY, , ,**

Mailing Address 1235 ROSEDALE DR.

City  
MANSFIELDState  
OHZip Code  
44906-3534FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
METRONOME MUSICOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733718**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732433**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734277**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

137.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5803 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735517**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, MARILYN, , ,**

Mailing Address 8600 BROMFIELD ROAD

City  
OAK RIDGEState  
NCZip Code  
27310-9109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735568**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, WARD, , ,**

Mailing Address 380 OXEN TRL

City  
FREDERICKSBURGState  
TXZip Code  
78624-6613FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

404.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734713**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5804 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, WILLIAM, , ,**

Mailing Address 131 STEVENS CREEK RD

City  
WAYNESVILLEState  
NCZip Code  
28785-7408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LIFE POINTOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733973**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLS, KENNETH, B., ,**

Mailing Address 110 SAINTSBURY PL

City  
LEXINGTONState  
NCZip Code  
27295-2085FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

836.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732768**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIRANDA, ERNEST, , ,**

Mailing Address 7144 VIA MARIPOSA SUR

City  
BONSALLState  
CAZip Code  
92003-5623FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SQUAR MILNEROccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736654**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

389.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5805 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2025

**Transaction ID : SA11A.27732309**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIREE, JAMES, W.C., , JR.**

Mailing Address 208 CROSS RIDGE ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2025

**Transaction ID : SA11A.27733294**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIRSKY, CYNTHIA, A., MS.,**

Mailing Address 25331 DERBYHILL DRIVE

City  
LAGUNA HILLSState  
CAZip Code  
92653-7836FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PACIFIC RIM CAPITAL INC.Occupation (for Individual)  
DIRECTOR SPECIAL PROJECTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2180.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2025

**Transaction ID : SA11A.27735776**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

283.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5806 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIRSKY, CYNTHIA, A., MS.,**

Mailing Address 25331 DERBYHILL DRIVE

City  
LAGUNA HILLSState  
CAZip Code  
92653-7836FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PACIFIC RIM CAPITAL INC.Occupation (for Individual)  
DIRECTOR SPECIAL PROJECTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.25

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735777**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIRSKY, CYNTHIA, A., MS.,**

Mailing Address 25331 DERBYHILL DRIVE

City  
LAGUNA HILLSState  
CAZip Code  
92653-7836FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PACIFIC RIM CAPITAL INC.Occupation (for Individual)  
DIRECTOR SPECIAL PROJECTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.25

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735778**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIRSKY, CYNTHIA, A., MS.,**

Mailing Address 25331 DERBYHILL DRIVE

City  
LAGUNA HILLSState  
CAZip Code  
92653-7836FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PACIFIC RIM CAPITAL INC.Occupation (for Individual)  
DIRECTOR SPECIAL PROJECTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2180.25

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735779**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

547.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5807 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIRSKY, CYNTHIA, A., MS.,**

Mailing Address 25331 DERBYHILL DRIVE

City  
LAGUNA HILLS

State  
CA

Zip Code  
92653-7836

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PACIFIC RIM CAPITAL INC.

Occupation (for Individual)  
DIRECTOR SPECIAL PROJECTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.25

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27735780**

Amount of Each Receipt this Period

130.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIRSKY, CYNTHIA, A., MS.,**

Mailing Address 25331 DERBYHILL DRIVE

City  
LAGUNA HILLS

State  
CA

Zip Code  
92653-7836

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PACIFIC RIM CAPITAL INC.

Occupation (for Individual)  
DIRECTOR SPECIAL PROJECTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.25

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27735781**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIRSKY, CYNTHIA, A., MS.,**

Mailing Address 25331 DERBYHILL DRIVE

City  
LAGUNA HILLS

State  
CA

Zip Code  
92653-7836

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PACIFIC RIM CAPITAL INC.

Occupation (for Individual)  
DIRECTOR SPECIAL PROJECTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2180.25

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27735782**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

627.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5808 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIRSKY, CYNTHIA, A., MS.,**

Mailing Address 25331 DERBYHILL DRIVE

City  
LAGUNA HILLSState  
CAZip Code  
92653-7836FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PACIFIC RIM CAPITAL INC.Occupation (for Individual)  
DIRECTOR SPECIAL PROJECTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.25

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735783**

Amount of Each Receipt this Period

260.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIRSKY, CYNTHIA, A., MS.,**

Mailing Address 25331 DERBYHILL DRIVE

City  
LAGUNA HILLSState  
CAZip Code  
92653-7836FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PACIFIC RIM CAPITAL INC.Occupation (for Individual)  
DIRECTOR SPECIAL PROJECTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2180.25

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735787**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOBLEY, ANNA, , ,**

Mailing Address 3528 E SHEFFIELD WAY

City  
SPRINGFIELDState  
MOZip Code  
65802-2443FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733071**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

557.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5809 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOK, LIMING, , ,**

Mailing Address 29726 COJAK CIRCLE

City  
FAIR OAKS RANCHState  
TXZip Code  
78015-4521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731541

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOK, LIMING, , ,**

Mailing Address 29726 COJAK CIRCLE

City  
FAIR OAKS RANCHState  
TXZip Code  
78015-4521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731546

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOLENDORP, DAYTON, , MR.,**

Mailing Address 6507 CASTLE KNOLL COURT

City  
INDIANAPOLISState  
INZip Code  
46250-1439FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732020

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5810 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735024**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTAGNA, ROBIN, , ,**

Mailing Address 600ROBERT DANIEL DR UNIT 1104

City  
DANIEL ISLANDState  
SCZip Code  
29492-7463FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2322.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736142**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTEGRANDE, FAYE, , ,**Mailing Address 321 N LARCHMONT BL  
824City  
LOS ANGELESState  
CAZip Code  
90004-6408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

565.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732675**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5811 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTEGRANDE, FAYE, , ,**Mailing Address 321 N LARCHMONT BL  
824City  
LOS ANGELESState  
CAZip Code  
90004-6408FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734258**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTGOMERY, RICHARD, L., MR.,**

Mailing Address 505 2ND PL

City  
ABERNATHYState  
TXZip Code  
79311-4207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735095**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONTGOMERY, ROBBIE, , ,**

Mailing Address 655 DOVER RD

City  
BENTONIAState  
MSZip Code  
39040-9024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735666**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

296.85



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5812 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOODY, JO, ANN, ,**

Mailing Address 507 POWER DR.

City  
DUNCANVILLEState  
TXZip Code  
75116-3721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731670**

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORARIU, M, ALBIN, ,**

Mailing Address 5258 LINTON BLV # 101

City  
DELRAY BEACHState  
FLZip Code  
33484-6564FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FNCOccupation (for Individual)  
NEUROLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736397**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORGAN, BILL, , ,**

Mailing Address 12 SANDY COVE

City  
NEWPORT COASTState  
CAZip Code  
92657-2117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MDE SEMICONDUCTOR INCOccupation (for Individual)  
MDE SEMICONDUCTOR INC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731984**

Amount of Each Receipt this Period

237.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

313.96



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5813 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORGAN, DAVE, , ,**

Mailing Address 1525 RIVERVIEW DRIVE

City  
HURONState  
SDZip Code  
57350-4209FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.30

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732505**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORGAN, DAVID, G., ,**Mailing Address 4412 ISLAND PLACE  
104

City

ANNANDALE

State  
VAZip Code  
22003-4885FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.98

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733585**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORGAN, TOM, , ,**

Mailing Address 19226 66TH AVE SOUTH L-108

City

KENT

State  
WAZip Code  
98032-2121FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MORGAN PARTNERSOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736697**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

204.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5814 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORRIS, ANJALI, , ,**

Mailing Address 863-C SAN PABLO AVENUE

City  
ALBANYState  
CAZip Code  
94706-1683FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733239

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORRIS, ANJALI, , ,**

Mailing Address 863-C SAN PABLO AVENUE

City  
ALBANYState  
CAZip Code  
94706-1683FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734481

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRIS, MAURICE, , ,**

Mailing Address 1427 SUNMEADOW LANE

City  
ROCKFORDState  
ILZip Code  
61107-5438FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733723

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

174.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5815 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORRICAL, PATRICIA, K., ,**

Mailing Address 5682 COUNTRY LAKES DR

City  
SARASOTAState  
FLZip Code  
34243-3811FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734604**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORSE, ROBERT, , ,**

Mailing Address 28445 HIGHGATE DR.

City  
BONITA SPRINGSState  
FLZip Code  
34135-6832FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734603**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOSES, GEORGE, L., ,**

Mailing Address 101 NW FORT SILL BLVD

City  
LAWTONState  
OKZip Code  
73507-6611FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

367.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732324**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5816 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOUAT, NANCY, M., MS.,**

Mailing Address 29242 HIGHWAY 127

City  
GREEN RIDGEState  
MOZip Code  
65332-2303FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.48

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731870**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOYER, JOHN, , ,**Mailing Address 525 SOUTH MAIN ST  
SUITE 700City  
TULSAState  
OKZip Code  
74103-4508FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ROSENSTEIN, FIST & RINGOLDOccupation (for Individual)  
ROSENSTEIN, FIST & RINGOLD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732268**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUELLER, JUDY, , ,**

Mailing Address 20906 W SNOWBERRY LN

City  
PLAINFIELDState  
ILZip Code  
60544-7495FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733607**

Amount of Each Receipt this Period

20.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116.57

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5817 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUELLER, VALERIE, , ,**

Mailing Address PO BOX 2863

City  
GULFPORT

State  
MS

Zip Code  
39505-2863

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RPMPIZZA

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.35

Date of Receipt

**02** / **28** / **2025**

**Transaction ID : SA11A.27735377**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MULAR, KATHLEEN, , ,**

Mailing Address 8215 BUNTON ROAD

City  
WILLIS

State  
MI

Zip Code  
48191-9501

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
PARKWAY SERVICES INC

Occupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.18

Date of Receipt

**02** / **28** / **2025**

**Transaction ID : SA11A.27736180**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MULLER, DONNA, , MS.,**

Mailing Address 295 JUDD RD

City  
MILAN

State  
MI

Zip Code  
48160-9585

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.10

Date of Receipt

**02** / **28** / **2025**

**Transaction ID : SA11A.27731754**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

239.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5818 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MULLER, DONNA, , MS.,**

Mailing Address 295 JUDD RD

City  
MILANState  
MIZip Code  
48160-9585FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734305**

Amount of Each Receipt this Period

24.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MUNN, NANCY, , ,**

Mailing Address 6605 W BRAEBOURNE DR

City  
ROGERSState  
ARZip Code  
72758-8963FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732091**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUNSEY, MELODYE, , ,**

Mailing Address 3535 SO OCEAN DR.

City  
HOLLYWOODState  
FLZip Code  
33019-2898FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FAMILY CHRISTIAN WORLD INC .Occupation (for Individual)  
SR. PASTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

478.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736146**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1128.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5819 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, JAMES, , ,**

Mailing Address 135 SUNSHINE DR.

City  
PACIFICAState  
CAZip Code  
94044-1125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.46

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732266**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NASH, JANIS, , ,**

Mailing Address 2207 E 11620 S

City  
SANDYState  
UTZip Code  
84092-5668FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.08

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732480**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NASH, JANIS, , ,**

Mailing Address 2207 E 11620 S

City  
SANDYState  
UTZip Code  
84092-5668FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.08

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733120**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

184.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5820 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, MIKE, G., ,**

Mailing Address 711 E 3230 N

City  
LEHIState  
UTZip Code  
84043-2910FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732693**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, MONICA, , ,**

Mailing Address 16420 KNOLLRIDGE CT NW

City

PRIOR LAKE

State

MN

Zip Code

55372-1990

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735352**

Amount of Each Receipt this Period

130.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NESTLEROTH, DAVID, , ,**Mailing Address 12001 MARKET ST  
APT 445

City

RESTON

State

VA

Zip Code

20190-6223

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JACOBSOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732032**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.85



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5821 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NESTLEROTH, DAVID, , ,**

Mailing Address 12001 MARKET ST  
APT 445

City  
RESTON

State  
VA

Zip Code  
20190-6223

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
JACOBS

Occupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.18

Date of Receipt

**02** / **28** / **2025**

**Transaction ID : SA11A.27733827**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NESTLEROTH, DAVID, , ,**

Mailing Address 12001 MARKET ST  
APT 445

City  
RESTON

State  
VA

Zip Code  
20190-6223

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
JACOBS

Occupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.18

Date of Receipt

**02** / **28** / **2025**

**Transaction ID : SA11A.27733828**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NESTLEROTH, DAVID, , ,**

Mailing Address 12001 MARKET ST  
APT 445

City  
RESTON

State  
VA

Zip Code  
20190-6223

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
JACOBS

Occupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.18

Date of Receipt

**02** / **28** / **2025**

**Transaction ID : SA11A.27733829**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

9.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5822 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NESTLEROTH, DAVID, , ,**Mailing Address 12001 MARKET ST  
APT 445City  
RESTONState  
VAZip Code  
20190-6223FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JACOBSOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733854**

Amount of Each Receipt this Period

52.1

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEUMAN, KIT, , ,**

Mailing Address 335 VINNEDGE AV.

City  
BLACKWELLState  
OKZip Code  
74631-4825FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731997**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEUMAN, KIT, , ,**

Mailing Address 335 VINNEDGE AV.

City  
BLACKWELLState  
OKZip Code  
74631-4825FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732220**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5823 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEVES, RICHARD, , ,**

Mailing Address 737 DANE CT

City  
HEMETState  
CAZip Code  
92543-1785FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731562

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NGUYEN, NGAI, X., DR.,**Mailing Address 696 EAST SANTA CLARA STREET  
108City  
SAN JOSEState  
CAZip Code  
95112-1911FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1564.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731859

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NGUYEN, TOAN, , ,**

Mailing Address 472 ILCREST DR.

City  
HOUSTONState  
TXZip Code  
77042-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735617

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

129.81

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5824 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NGUYEN, TOAN, , ,**

Mailing Address 472 ILCREST DR.

City  
HOUSTONState  
TXZip Code  
77042-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735878**

Amount of Each Receipt this Period

46.53

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NICHOLS, PHIL, , ,**

Mailing Address 407 WEST CORNELL STREET

City  
AVON PARKState  
FLZip Code  
33825-3700FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1266.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732561**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NIELSEN, EARL, , ,**

Mailing Address 10 LIDGERWOOD PLACE

City  
MORRISTOWNState  
NJZip Code  
07960-5736FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MORRISTOWN MEDICAL CENTEROccupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733840**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5825 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NIEMANN, NANCY, , ,**

Mailing Address 18 DOGWOOD RD.

City  
MORRIS PLAINSState  
NJZip Code  
07950-1919FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

853.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733069**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOBLE, LEATRICE, , ,**

Mailing Address 8631 W RUSHMORE ST

City  
RATHDRUMState  
IDZip Code  
83858-8514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734952**

Amount of Each Receipt this Period

8.33

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NOLLER, KENNETH, , ,**

Mailing Address 5752 BLACKBIRD LANE

City  
LA VERNEState  
CAZip Code  
91750-2370FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733761**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

138.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5826 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NORTH, WALTER, , ,**

Mailing Address 8552 COBBLESTONE DR.

City  
FORT PIERCEState  
FLZip Code  
34945-5701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732737

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NORTH, WALTER, , ,**

Mailing Address 8552 COBBLESTONE DR.

City  
FORT PIERCEState  
FLZip Code  
34945-5701FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732790

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUCKOLS, GAIL, , MS.,**

Mailing Address 13144 RD.216

City  
PORTERVILLEState  
CAZip Code  
93257-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GAIL NUCKOLSOccupation (for Individual)  
CATER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

372.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733605

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

167.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5827 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUCKOLS, GAIL, , MS.,**

Mailing Address 13144 RD.216

City  
PORTERVILLEState  
CAZip Code  
93257-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GAIL NUCKOLSOccupation (for Individual)  
CATER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735834**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NUDI, PETER, , ,**

Mailing Address 1072 LILLY VUE CT

City  
MARSState  
PAZip Code  
16046-3054FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733778**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNLEY, CHARLES, L., MR.,**

Mailing Address P.O. BOX 2169

City  
DULUTHState  
GAZip Code  
30096-0038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

589.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733766**

Amount of Each Receipt this Period

10.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5828 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O'FLYNN, ARMINDA, , ,**

Mailing Address 12864 BISCAYNE BLVD

City  
N. MIAMIState  
FLZip Code  
33181-2007FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

992.53

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736315**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O'ROURKE, DON, , , SR.**

Mailing Address 909 ROPER DRIVE

City  
SCOTTState  
LAZip Code  
70583-4701FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.74

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736147**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OAK, ALAN, , MR.,**

Mailing Address 5104 BONHAM RD

City  
OXFORDState  
OHZip Code  
45056-3606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

471.83

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736486**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

158.58



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5829 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ORDWAY, CHRIS, R., MR.,**

Mailing Address 292 ISLAND CREEK DR.

City  
VERO BEACHState  
FLZip Code  
32963-3303FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733346**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ORDWAY, CHRIS, R., MR.,**

Mailing Address 292 ISLAND CREEK DR.

City  
VERO BEACHState  
FLZip Code  
32963-3303FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736844**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSBORNE, LARRY, O., MR.,**

Mailing Address 1933 EAGLE DR

TRLR D

City  
MORRISState  
ILZip Code  
60450-6817FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735925**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

231.15

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5830 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27736280**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27736282**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSSOFF, ROBERT, , DR.,**

Mailing Address 2014 FRANSWORTH DR.

City  
NASHVILLE

State  
TN

Zip Code  
37205-2700

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.06

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA11A.27736286**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

48.56

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5831 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OTHOLD, CHARLES, W., MR.,**Mailing Address 5632 VAN NUYS BLVD  
#5City  
VAN NUYSState  
CAZip Code  
91401-4602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOCKHEED MARTIN AERONAUTICSOccupation (for Individual)  
ENGINEER RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735898

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OWEN, JAMES, , ,**

Mailing Address 254 MEYERMAN RD

City  
OWEGOState  
NYZip Code  
13827-6744FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VERIZONOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736652

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OWEN, JAMES, , ,**

Mailing Address 254 MEYERMAN RD

City  
OWEGOState  
NYZip Code  
13827-6744FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VERIZONOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736705

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5832 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OWEN, WILLIAM, E., MR.,**

Mailing Address 481 S KEELER WOODS DR NW

City  
MARIETTAState  
GAZip Code  
30064-2027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736392**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAGE, CHERYL, L., MS.,**

Mailing Address 13 PIPESTONE DR.

City  
MIAMISBURGState  
OHZip Code  
45342-6603FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MIAMI VALLEY HOSPITALOccupation (for Individual)  
NURSE/RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732911**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAIS, MEG, , ,**

Mailing Address 530 RIDGECREST RD

City  
AKRONState  
OHZip Code  
44303-1341FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SIRVAOccupation (for Individual)  
EVP HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734940**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5833 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAK, LISA, , ,**

Mailing Address 3925 NE 2ND AVE

City  
MIAMIState  
FLZip Code  
33137-3621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736801

Amount of Each Receipt this Period

475.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PALERMO, MARK, , ,**

Mailing Address 246 GARFIELD PL

City  
BROOKLYNState  
NYZip Code  
11215-2207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER, INVESTOR, CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.48

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734072

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PALERMO, MARK, , ,**

Mailing Address 246 GARFIELD PL

City  
BROOKLYNState  
NYZip Code  
11215-2207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
LAWYER, INVESTOR, CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

748.48

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734117

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

560.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5834 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALMER, JEAN, B., MRS.,**

Mailing Address 224 ARNOLD AVE

City  
SYRACUSEState  
NYZip Code  
13210-3714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734950

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PALMER, JEAN, B., MRS.,**

Mailing Address 224 ARNOLD AVE

City  
SYRACUSEState  
NYZip Code  
13210-3714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736217

Amount of Each Receipt this Period

14.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PALMER, JEAN, B., MRS.,**

Mailing Address 224 ARNOLD AVE

City  
SYRACUSEState  
NYZip Code  
13210-3714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736439

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

29.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5835 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PALMER, JEAN, B., MRS.,**

Mailing Address 224 ARNOLD AVE

City  
SYRACUSEState  
NYZip Code  
13210-3714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736615**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PANZARELLA, JOHN, , ,**

Mailing Address 1659 CANANARO DRIVE

City  
ANNAPOLISState  
MDZip Code  
21409-5601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OMNISECOccupation (for Individual)  
DEPT. OF DEF.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733343**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARR, LARUE, , MR.,**

Mailing Address 2645 BIG CREEK CHURCH RD

City  
DONGOLAState  
ILZip Code  
62926-2012FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734069**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

228.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5836 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARSONS, DENISE, , ,**

Mailing Address 1324 COUNTY ROAD 225

City  
BLUFFTONState  
TXZip Code  
78607-3008FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735265**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731858**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAVLUS, MARLENE, , ,**

Mailing Address 9161 VERNON HILL

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039-9766FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733667**

Amount of Each Receipt this Period

1.98

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.98



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5837 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAYNE, CAROLYN, L., ,**

Mailing Address 2216 CAYUSE ST

City  
TWIN FALLSState  
IDZip Code  
83301-5685FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735419**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PECORA, SANDRA, J., MRS.,**

Mailing Address 20 EDGEWATER CT

City  
WAKEMANState  
OHZip Code  
44889-9082FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735922**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PELLETIER, JOHN, , ,**

Mailing Address 199 MAIN STREET

City  
VAN BURENState  
MEZip Code  
04785-1256FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UMFKOccupation (for Individual)  
ADJUNCT PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736574**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

239.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5838 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PENCE, NANCY, E., MS.,**

Mailing Address 5179 SILVER SAGE DR.

City  
CARSON CITYState  
NVZip Code  
89701-8506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731885

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERKINS, ALAN, , ,**

Mailing Address 68 ATLANTIC AVE

City  
NORTH HAMPTONState  
NHZip Code  
03862-2306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734139

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERRY, HUGH, D., MR.,**

Mailing Address 5205 FREDERICKSBURG WAY E

City  
BRENTWOODState  
TNZip Code  
37027-4770FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

401.48

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736253

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

164.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5839 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PERRY, NELL, , ,**

Mailing Address 1705 PALMETTO CV

City  
DERIDDERState  
LAZip Code  
70634-5382FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733099

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRY, NELL, , ,**

Mailing Address 1705 PALMETTO CV

City  
DERIDDERState  
LAZip Code  
70634-5382FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733478

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERS, ELLIE, , ,**

Mailing Address 302 US HWY 385 NORTH

City  
SEMINOLEState  
TXZip Code  
79360-7119FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARM RANCH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

712.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735598

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

151.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5840 OF 6441  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORGState  
VAZip Code  
23860-8229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735574**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETERSON, TORSTEN, E., , JR.**

Mailing Address 1712 JORDAN POINT ROAD

City  
NORTH PRINCE GEORGState  
VAZip Code  
23860-8229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736849**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETITJEAN, SANDRA, , ,**

Mailing Address 6832 TAMARA LANE

City  
ASSARIAState  
KSZip Code  
67416-8875FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736846**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.21

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5841 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETROSKE, SARAH, , ,**

Mailing Address 518 FAIRFAX AVE.

City  
NORFOLKState  
VAZip Code  
23507-2110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735811**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHILLIPS, CHRIS, , ,**

Mailing Address 306 N BROADWAY ST

City  
CARL JUNCTIONState  
MOZip Code  
64834-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOPLIN SUPPLY COOccupation (for Individual)  
SALES COUNTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735160**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PHILLIPS, KAREN, , ,**

Mailing Address 13888 STATE ROAD 32 EAST

City  
NOBLESVILLEState  
INZip Code  
46060-8858FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

680.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735088**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.45

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5842 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PHILLIPS, MYRON, G., MR.,**

Mailing Address 18805 86TH PL W

City  
EDMONDSState  
WAZip Code  
98026-5907FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735425**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PHIPPS, ALLEN, M., MR.,**

Mailing Address 925 WHITEHALL LN

City  
REDWOOD CITYState  
CAZip Code  
94061-3686FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.33

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732278**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIETTE, LYSSA, , ,**

Mailing Address 118 EAST ERIE STREET 23A

City  
CHICAGOState  
ILZip Code  
60611-5151FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

740.75

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733186**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5843 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PINKERTON, EILEEN, R., MS.,**

Mailing Address 3340 GREGORY DR W

City  
BILLINGSState  
MTZip Code  
59102-0597FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
DECORATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.96

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736765**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PLACA, ALAN, , ,**

Mailing Address 200 EAGLETON ESTATE BLVD

City  
PALM BEACH GARDENSState  
FLZip Code  
33418-8411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIULIANI PARTNERS LLCOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.94

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732206**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PLACA, ALAN, , ,**

Mailing Address 200 EAGLETON ESTATE BLVD

City  
PALM BEACH GARDENSState  
FLZip Code  
33418-8411FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GIULIANI PARTNERS LLCOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

567.94

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734747**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5844 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PLACA, ALAN, , ,**

Mailing Address 200 EAGLETON ESTATE BLVD

City  
PALM BEACH GARDENSState  
FLZip Code  
33418-8411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GIULIANI PARTNERS LLCOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735792**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PLUMMER, ROBERT, KEMP, ,**

Mailing Address 4308 VILLAGE DR

City  
TRINITYState  
NCZip Code  
27370-9492FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733564**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POLACK, LINDA, , ,**

Mailing Address 5537 OLD STILL ROAD

City  
WAKE FORESTState  
NCZip Code  
27587-9768FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2580.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731667**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.80



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5845 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POMEROY, PATTI, , ,**

Mailing Address 902 SILVER ST

City  
PRINCETONState  
TXZip Code  
75407-2281FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734477**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PORTER, LISABETH, , ,**

Mailing Address 185 MIDDLE ROAD

City  
MONTECITOState  
CAZip Code  
93108-2448FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732779**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PORTER, LISABETH, , ,**

Mailing Address 185 MIDDLE ROAD

City  
MONTECITOState  
CAZip Code  
93108-2448FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734174**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

236.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5846 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POTEET, MARY, , ,**Mailing Address 3636 GREENACRES PLACE DR.  
APT 43City  
BOSSIER CITYState  
LAZip Code  
71111-2147FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733335

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POWELL, DOUG, , ,**

Mailing Address 14461 BROOK HOLLOW RD

City  
SUMMERDALEState  
ALZip Code  
36580-4211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735891

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POZZI, ROBERT, J., ,**

Mailing Address 3733 FALSTONE ROAD

City  
RICHMONDState  
VAZip Code  
23234-3769FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731800

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

194.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5847 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRINDLE, GLEN, , ,**

Mailing Address 942 DISCOVERY CIR NE

City  
ISSAQUAHState  
WAZip Code  
98029-6203FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SPUOccupation (for Individual)  
FACILITY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.99

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735869**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRINDES, JOHN, , ,**

Mailing Address 65 FARMINGTON RD

City  
SAVANNAHState  
TNZip Code  
38372-6165FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.40

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732769**

Amount of Each Receipt this Period

128.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRINDES, JOHN, , ,**

Mailing Address 65 FARMINGTON RD

City  
SAVANNAHState  
TNZip Code  
38372-6165FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

456.40

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735330**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5848 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PYLES, RICHARD, , ,**

Mailing Address 5402 DUTTON AVE

City  
NORTH CHARLESTONState  
SCZip Code  
29406-3761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TANK INDUSTRY CONSULTANTSOccupation (for Individual)  
TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734839**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PYLES, RICHARD, , ,**

Mailing Address 5402 DUTTON AVE

City  
NORTH CHARLESTONState  
SCZip Code  
29406-3761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TANK INDUSTRY CONSULTANTSOccupation (for Individual)  
TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736283**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. QUINTANA, CARLOS, , ,**

Mailing Address 2250 HAYES STREET

City  
SAN FRANCISCOState  
CAZip Code  
94117-1078FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
NEUROLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732778**

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.13

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5849 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. QUINTANA, CARLOS, , ,**

Mailing Address 2250 HAYES STREET

City  
SAN FRANCISCOState  
CAZip Code  
94117-1078FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
NEUROLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732845**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RABE, KAREN, , ,**Mailing Address 27285 LAS RAMBLAS  
STE 240City  
MISSION VIEJOState  
CAZip Code  
92691-6325FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732658**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RADY, PAUL, M., MR.,**

Mailing Address 4 MOCKINGBIRD LN

City  
ENGLEWOODState  
COZip Code  
80113-4813FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ANTERO RESOURCESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

8901.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735130**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.77

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5850 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAKOCZY, JENNIFER, , ,**

Mailing Address 14135 AQUILA ROAD

City  
BURTONState  
OHZip Code  
44021-9557FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736379**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RANKIN, DEBRA, CONNOR, MS.,**

Mailing Address 542 MOUNT OLIVE CHURCH RD.

City  
TIFTONState  
GAZip Code  
31794-2628FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733958**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RANSOM, JAMES, H., DR.,**

Mailing Address 319 WOODLAND RD.

City  
SEWICKLEYState  
PAZip Code  
15143-1048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

890.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736409**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

260.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5851 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RATHBONE, KENNETH, , MR.,**

Mailing Address 237 DILLON AVE

City  
CHEYENNEState  
WYZip Code  
82007-2259FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732484**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734780**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734782**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

68.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5852 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734784**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAUH, GLENN, , MR.,**

Mailing Address 659 SANTA FE TRL.

City  
METAMORAState  
ILZip Code  
61548-7561FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MTCOOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734786**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. READ, JEAN, , ,**

Mailing Address 367 RED #ROCK ROAD

City  
WICHITA FALLSState  
TXZip Code  
76305-2817FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731635**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

69.02



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5853 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. READ, JEAN, , ,**

Mailing Address 367 RED #ROCK ROAD

City  
WICHITA FALLSState  
TXZip Code  
76305-2817FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732112**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. READ, JEAN, , ,**

Mailing Address 367 RED #ROCK ROAD

City  
WICHITA FALLSState  
TXZip Code  
76305-2817FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734351**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. READ, THOMAS, , ,**

Mailing Address 114 LYNDBURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731973**

Amount of Each Receipt this Period

0.40

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5854 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736049

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736051

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736052

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

74.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5855 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736064

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736066

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736077

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

53.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5856 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. READ, THOMAS, , ,**

Mailing Address 114 LYNDHURST DRIVE

City  
WYLIEState  
TXZip Code  
75098-6909FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736087**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REAGAN, RONALD, C., ,**

Mailing Address 1783 FOUR MILE COVE PKWY

City

CAPE CORAL

State

FL

Zip Code

33990-2409

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731551**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RECUPERO, RITA, , ,**

Mailing Address 14000 CAROLINES COVE #101A

City

ORMOND BEACH

State

FL

Zip Code

32174-3188

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733593**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5857 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REEVES, BOB, R., MR.,**

Mailing Address 4500 S ROLLING HILLS RD

City  
COLUMBIAState  
MOZip Code  
65201-8828FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

954.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732141**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REEVES, BOB, R., MR.,**

Mailing Address 4500 S ROLLING HILLS RD

City  
COLUMBIAState  
MOZip Code  
65201-8828FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

954.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734473**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REEVES, BOB, R., MR.,**

Mailing Address 4500 S ROLLING HILLS RD

City  
COLUMBIAState  
MOZip Code  
65201-8828FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

954.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735737**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5858 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICHARDSON, CHRIS, , ,**

Mailing Address 4001 W SAM HOSUTON PKWY N STE 100

City  
HOUSTONState  
TXZip Code  
77043-1236FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BLAZER BUILDINGOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.50

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731717**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732118**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732124**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5859 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733112**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733384**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIEDINGER, EVA, , ,**

Mailing Address 3771 RAMSEY STREET

City  
FAYETTEVILLEState  
NCZip Code  
28311-7675FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

470.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734045**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

16.40

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5860 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RILEY, BRUCE, A., ,**

Mailing Address 2720 DONALD ROSS RD

City  
PALM BEACH GARDENSState  
FLZip Code  
33410-1161FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733222**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIPPY, JAMES, , ,**

Mailing Address 820 S SWALLOW WAY

City  
ANAHEIMState  
CAZip Code  
92807-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732716**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RITCHEY, GREG, , ,**

Mailing Address 5333 53 STREET N

City  
SAINT PETERSBURGState  
FLZip Code  
33709-3735FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
USPSOccupation (for Individual)  
LETTER CARRIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

256.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736549**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5861 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, MARILYN, , ,**

Mailing Address 7 GREEN PINES. CT

City  
SAINT PETERSState  
MOZip Code  
63376-1986FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736793**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, THOMAS, , ,**

Mailing Address 1906 MARIGOLD ST

City  
ALEXANDRIAState  
LAZip Code  
71301-3934FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734944**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODABOUGH, MARILYN, , ,**

Mailing Address P.O. BOX 5069

City  
GLENDALEState  
AZZip Code  
85312-5069FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

243.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733817**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5862 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODABOUGH, MARILYN, , ,**

Mailing Address P.O. BOX 5069

City  
GLENDALEState  
AZZip Code  
85312-5069FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734635**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODACK, MARK, , ,**Mailing Address 16051 COLLINS AVE  
3502City  
NORTH MIAMI BEACHState  
FLZip Code  
33160-4624FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

782.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733875**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODACK, MARK, , ,**Mailing Address 16051 COLLINS AVE  
3502City  
NORTH MIAMI BEACHState  
FLZip Code  
33160-4624FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

782.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736422**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5863 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODRIQUEZ, MICHAEL, G., ,**

Mailing Address P.O. BOX 3765

City  
SHOW LOWState  
AZZip Code  
85902-3765FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733137

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROE, MITCHELL, E., ,**

Mailing Address 15626 INDIAN HEAD COURT

City  
RAMONAState  
CAZip Code  
92065-4511FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROEJACK CONSTRUCTIONOccupation (for Individual)  
ROOFER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734431

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROGERS, JIM, , ,**

Mailing Address 443 CRABAPPLE DR.

City  
HOWARDState  
OHZip Code  
43028-9575FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736483

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

154.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5864 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROLKER, JOHN, G., MR.,**

Mailing Address 14 W SARATOGA ST

City  
BALTIMOREState  
MDZip Code  
21201-4207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736825**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROUDNER, LEONARD, , ,**

Mailing Address 14 SOUTH HIBISCUS DRIVE

City  
MIAMI BEACHState  
FLZip Code  
33139-5128FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732131**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROUSE, JUDY, , ,**

Mailing Address 5801 STONECREST

City  
MIDLANDState  
TXZip Code  
79707-9779FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE LIFE CENTEROccupation (for Individual)  
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732836**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

421.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5865 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROWE, GARRY, , ,**

Mailing Address 6650 EVENING ST

City  
COLUMBUSState  
OHZip Code  
43085-2487FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735291

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBEL, DIANE, , ,**

Mailing Address 23 TRIANGLE PARK DR.

City  
CONCORDState  
NHZip Code  
03301-5847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731543

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732108

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5866 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUDEGEAIR, FRANCIS, X., ,**

Mailing Address 5 HARBOR LANE

City  
GLEN HEADState  
NYZip Code  
11545-1610FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FX RUDEGEAIR CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1501.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735747**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731789**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINEState  
CAZip Code  
92604-2216FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732088**

Amount of Each Receipt this Period

4.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

58.18

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5867 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUSSELL, STEPHANIE, O., MS.,**

Mailing Address 4161 FIRESIDE CIR.

City  
IRVINE

State  
CA

Zip Code  
92604-2216

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

**Transaction ID : SA11A.27735601**

Amount of Each Receipt this Period

2.97

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUTHER, PATRICIA, M., ,**

Mailing Address 300 CHURCH ST

City  
MATAWAN

State  
NJ

Zip Code  
07747-1522

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

**Transaction ID : SA11A.27732401**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUTHER, PATRICIA, M., ,**

Mailing Address 300 CHURCH ST

City  
MATAWAN

State  
NJ

Zip Code  
07747-1522

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

**Transaction ID : SA11A.27733014**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

39.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5868 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUTHER, PATRICIA, M., ,**

Mailing Address 300 CHURCH ST

City  
MATAWANState  
NJZip Code  
07747-1522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733075

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RYAN, ROBERT, C., MR.,**

Mailing Address 95 RIMFIRE CIRCLE

City  
RENOState  
NVZip Code  
89519-2989FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOLLAND & HART LLPOccupation (for Individual)  
PATENT & IP ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732277

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAARION, CARL, , ,**

Mailing Address 6213 S GLEN TRAIL

City  
CIRCLE PINESState  
MNZip Code  
55014-5499FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736288

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

108.03



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5869 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAHAGIAN, ISHKHAN, K., MR.,**

Mailing Address 101 HIGH DESERT

City  
IRVINEState  
CAZip Code  
92602-1892FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.30

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734773**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SALTZMAN, ADELINE, , ,**

Mailing Address 909 S MICHIGAN AVE.

City  
ROSWELLState  
NMZip Code  
88203-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733861**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SALTZMAN, ADELINE, , ,**

Mailing Address 909 S MICHIGAN AVE.

City  
ROSWELLState  
NMZip Code  
88203-3846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735510**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5870 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANCHEZ, ROBERTO, , ,**

Mailing Address 6709 WASHINGTON #430

City  
WHITTIERState  
CAZip Code  
90608-7122FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736865**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANCHEZ, THOMAS, , ,**

Mailing Address 12140 BEATY AVE

City  
NORWALKState  
CAZip Code  
90650-1923FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.91

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735753**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANDERS, MELVIN, , ,**

Mailing Address 4039 MAYFLOWER CT SW

City  
LILBURNState  
GAZip Code  
30047-3206FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732702**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5871 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANFORD, MARCELLA, FRANCIS, MS.,**

Mailing Address 12593 CANBY AVE

City  
FARIBAULTState  
MNZip Code  
55021-7254FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.88

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731723**

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANTORO, NANCY, , ,**

Mailing Address P.O. BOX 2095

City  
RANCHO SANTA FEState  
CAZip Code  
92067-2095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1476.08

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734135**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANTORO, NANCY, , ,**

Mailing Address P.O. BOX 2095

City  
RANCHO SANTA FEState  
CAZip Code  
92067-2095FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1476.08

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735453**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5872 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SARBA, BARRY, , ,**

Mailing Address 435 BATTLE DR.

City  
FANNINState  
TXZip Code  
77960-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733413

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAULSBERRY, GAREN, , ,**

Mailing Address 4440 LONESOME PINE ROAD

City  
LAS CRUCESState  
NMZip Code  
88007-4566FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PERATONOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733480

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHAAB, JANICE, , ,**

Mailing Address 560 WOODINGTON DRIVE

City  
LANCASTERState  
CAZip Code  
93535-3808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

588.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731655

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

123.49

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5873 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHAFFNIT, WAYNE, , ,**

Mailing Address 340 DUNCAN ST

City  
SAN FRANCISCOState  
CAZip Code  
94131-2022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731687**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHATTYN, JOHN, , MR.,**

Mailing Address 129 CROCKETT DR.

City  
KERRVILLEState  
TXZip Code  
78028-8114FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733246**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHATTYN, JOHN, , MR.,**

Mailing Address 129 CROCKETT DR.

City  
KERRVILLEState  
TXZip Code  
78028-8114FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1214.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734643**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5874 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHIPPER, GERRIT, , ,**

Mailing Address 2344 DIXON RD

City  
FREDERICKState  
MDZip Code  
21704-8131FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CWCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733749

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHIPPER, GERRIT, , ,**

Mailing Address 2344 DIXON RD

City  
FREDERICKState  
MDZip Code  
21704-8131FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CWCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736531

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLEIFMAN, NOEL, , MR.,**

Mailing Address 180 VALENCIA DRIVE

City  
MONROE TOWNSHIPState  
NJZip Code  
08831-5978FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735539

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

103.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5875 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLOUGH, JAMES, , ,**

Mailing Address 3810 CHURCH HILL

City  
CRYSTAL LAKEState  
ILZip Code  
60014-6511FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734079**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHNEEGASS, GEORGE, F., MR.,**

Mailing Address 3675 MOUNTAIN DR.

City  
COLORADO SPRINGSState  
COZip Code  
80918-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

634.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736814**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHOOSE, ROBERT, , ,**

Mailing Address 919 E LOCKWOOD ST

City  
MESAState  
AZZip Code  
85203-1915FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GOLDFIELD GHOST TOWNOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735714**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5876 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHRIVER, LAURA, , ,**

Mailing Address 2645 EDGE HILL RD

City  
HUNTINGDON VALLEYState  
PAZip Code  
19006-5519FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732093**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHULTZ, DONNA, I., MS.,**

Mailing Address 4801 ZINFANDEL LN

City  
BAKERSFIELDState  
CAZip Code  
93306-1859FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.38

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732905**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHULTE, JAMES, , ,**

Mailing Address 4073 CO RD 452

City  
NEW BLOOMFIELDState  
MOZip Code  
65063-1673FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732958**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

238.75



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5877 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHUMAN, JAMES, , ,**

Mailing Address 106 POGUE AVE

City  
EASTLANDState  
TXZip Code  
76448-3005FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
J & J AIR CONDITIONINGOccupation (for Individual)  
A/C SALES & SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733746**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHWAB, LOWELL, , ,**

Mailing Address 6255 MOHAWK DRIVE

City  
HAMELState  
MNZip Code  
55340-9708FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735650**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHWAB, PAUL, , ,**

Mailing Address 5001 230TH ST

City  
RANDALLState  
MNZip Code  
56475-2326FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PKP LLCOccupation (for Individual)  
CO-OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735375**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

228.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5878 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHWIETERMAN, DALE, , ,**

Mailing Address 3924 COUNTY ROAD 716A

City  
CELINAState  
OHZip Code  
45822-8121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735622

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, ALAN, , ,**

Mailing Address 5655 E MISTIC BAY BLVD

City

MARBLEHEAD

State

OH

Zip Code

43440-9684

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736576

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, JOHN, , ,**

Mailing Address 8012 FIELDSTONE AVENUE NW

City

ALBUQUERQUE

State

NM

Zip Code

87120-8030

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732236

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

154.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5879 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, RODGER, C., MR.,**Mailing Address 20405 SE 344TH  
#851City  
AUBURNState  
WAZip Code  
98092-1592FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734574**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SELLERS, JANICE, , ,**

Mailing Address 1411 MARTIN ROAD

City

KINGS MOUNTAIN

State

NC

Zip Code

28086-9386

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735840**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SELZER, INGRID, , ,**

Mailing Address 2614 MEADOW LANE

City

LA MARQUE

State

TX

Zip Code

77568-5044

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

228.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734593**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

231.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5880 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SESSIONS, ROXANNE, , ,**

Mailing Address 8592CREEKWAY

City  
ALANSONState  
MIZip Code  
49706-8516FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734123

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEWELL, WILLIAM, , ,**

Mailing Address 8666 CANAL DRIVE

City  
JONESBOROState  
GAZip Code  
30236-4076FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CKS PACKAGING INCOccupation (for Individual)  
COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734985

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHEDLOCK, JOHN, , ,**

Mailing Address 10089 IRON MOUNTAIN CT

City  
RANCHO CUCAMONGAState  
CAZip Code  
91737-6831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731795

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

73.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5881 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHELTON, SHARON, K., MRS.,**

Mailing Address 9692 LONGMONT DRIVE

City  
HOUSTONState  
TXZip Code  
77063-1029FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.88

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735094**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHINKLE, RUSSELL, , ,**

Mailing Address 9350 ETON AVE

City  
CHATSWORTHState  
CAZip Code  
91311-5809FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.16

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734021**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHIPWASH, MARY, , MRS.,**

Mailing Address 12505 TABOR OAKS DR.

City  
AUSTINState  
TXZip Code  
78739-4831FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1795.53

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736773**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5882 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHIVELY, KENNETH, , ,**

Mailing Address PO BOX 25333

City  
TUCSONState  
AZZip Code  
85734-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.40

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731522**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732570**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732573**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

85.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5883 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732575

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732576

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHOCKLEY, SANDRA, , ,**

Mailing Address 56 KINGSLEY CIR

City  
ORMOND BEACHState  
FLZip Code  
32174-9213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
OWN RADIO STATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1530.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732577

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5884 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHOUSE, JERROLD, R., MR.,**

Mailing Address 2555 SOUTH 9TH AVENUE

City  
SAFFORDState  
AZZip Code  
85546-3630FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734823**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHUFORD, JACOB, L., ,**

Mailing Address 255 TOMBEE LN

City  
COLUMBIAState  
SCZip Code  
29209-0804FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.20

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733623**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHUGER, JILL, , ,**

Mailing Address N7756 BUSHEY RD

City  
TREGOState  
WIZip Code  
54888-9327FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.05

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734730**

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5885 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SICOLA, CHARLES, , ,**

Mailing Address 5532 JENNIE ST

City  
ZEPHYRHILLSState  
FLZip Code  
33542-6829FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FRANCHISE CONSULTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.03

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732710**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SICOLA, CHARLES, , ,**

Mailing Address 5532 JENNIE ST

City  
ZEPHYRHILLSState  
FLZip Code  
33542-6829FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FRANCHISE CONSULTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.03

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735798**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIEGEL, CINDA, , ,**

Mailing Address 11310 CABBOT COVE CT

City  
TOMBALLState  
TXZip Code  
77375-8400FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734717**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5886 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIEWERT, CHARLES, R., ,**

Mailing Address 6067 HOGAN DR N

City  
KEIZERState  
ORZip Code  
97303-7445FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735072**

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SILVEIRA, CHRIS, , ,**

Mailing Address 3 HILLBILLY LN, LOT A

City

CRESCENT VALLEY

State

NV

Zip Code

89821-8083

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736609**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIMONIAN, VIC, S., MR.,**

Mailing Address 6 BURNING TREE

City

LAGUNA NIGUEL

State

CA

Zip Code

92677-5305

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

288.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733789**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5887 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIMONIAN, VIC, S., MR.,**

Mailing Address 6 BURNING TREE

City  
LAGUNA NIGUELState  
CAZip Code  
92677-5305FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734372

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SKIBINSKI, DAVID, , ,**

Mailing Address 36 GLACIER DR.

City  
MORRIS PLAINSState  
NJZip Code  
07950-2748FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PFIZEROccupation (for Individual)  
COMPUTER SYSTEMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735567

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLACK, PAMELA, W., ,**

Mailing Address 3696 N. CHINA RD.

City  
BEAUMONTState  
TXZip Code  
77713-3394FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

432.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733054

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

161.19

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5888 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLADE, DAVID, , ,**

Mailing Address 11 HIBISCUS DR

City  
PUNTA GORDAState  
FLZip Code  
33950-5034FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
EXPORT-IMPORT BANK OF THE USOccupation (for Individual)  
SENIOR COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733258**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLAUGHTER, JAMES, G., MR., JR.**

Mailing Address 2128 KILKENNY

City  
PEARLANDState  
TXZip Code  
77581-5167FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
S&B ENGINEERS & CONSTRUCTORSOccupation (for Individual)  
CEO EMERITUS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732661**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLOCUMB, JOANELLEN, H., MRS.,**

Mailing Address PO 3892

City  
INCLINE VILLAGEState  
NVZip Code  
89450-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

279.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736681**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5889 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMILER, DENNIS, , MR.,**Mailing Address 12975 AGUSTIN PL  
APT 139City  
PLAYA VISTAState  
CAZip Code  
90094-2398FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735454**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, ELIZABETH, , ,**

Mailing Address 1709 INDIAN WELLS AVE

City  
OCALAState  
FLZip Code  
34472-8401FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736568**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, LINDA, NESTOR, ,**Mailing Address 700 PENN CENTER BLVD APT 403  
LAUREL VILLAGE APTSCity  
PITTSBURGHState  
PAZip Code  
15235-5916FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

273.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735081**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5890 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, MIKE, , ,**

Mailing Address 3 WEST VALE LANE

City  
PADUCAHState  
KYZip Code  
42001-6725FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734962

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, SANDRA, , ,**

Mailing Address 825 REDBUD DR

City  
GREENEVILLEState  
TNZip Code  
37743-6141FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733055

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SNYDER, CARLA, , ,**

Mailing Address 15725 S. INDEPENDENCE CT., APT. 2W

City  
OAK FORESTState  
ILZip Code  
60452-3249FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CCSSOccupation (for Individual)  
RESIDENTIAL MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

546.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732201

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

346.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5891 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SNYDER, CARLA, , ,**

Mailing Address 15725 S. INDEPENDENCE CT., APT. 2W

City  
OAK FORESTState  
ILZip Code  
60452-3249FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CCSSOccupation (for Individual)  
RESIDENTIAL MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733048**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SNYDER, LYNN, K., MS.,**

Mailing Address 8 BERWYN LN

City  
WEST HARTFORDState  
CTZip Code  
06107-1103FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736471**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOKENIS, ROGER, , ,**

Mailing Address 16 ST JOHNS AVENUE

City  
HICKSVILLEState  
NYZip Code  
11801-5208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733179**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

191.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5892 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOLIMINE, ROBERT, F., MR.,**

Mailing Address 35 SEACOAST TER APT 5E

City  
BROOKLYNState  
NYZip Code  
11235-6031FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.83

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732977**

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLTYSIAK, CAROL, , ,**

Mailing Address 12120 NE 234TH ST

City  
ARCADIAState  
OKZip Code  
73007-9010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.43

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732750**

Amount of Each Receipt this Period

1.04

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLTYSIAK, CAROL, , ,**

Mailing Address 12120 NE 234TH ST

City  
ARCADIAState  
OKZip Code  
73007-9010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.43

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733409**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5893 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOUTHARD, DIANA, , ,**

Mailing Address 1346 HICKORY RIDGE LN

City  
COLUMBUSState  
OHZip Code  
43235-1131FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731901**

Amount of Each Receipt this Period

29.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOUTHARD, DIANA, , ,**

Mailing Address 1346 HICKORY RIDGE LN

City  
COLUMBUSState  
OHZip Code  
43235-1131FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731917**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPAIN, KEN, , ,**

Mailing Address 104 SAINT HELENS AVE

City  
MOXEEState  
WAZip Code  
98936-9012FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

346.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734636**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

223.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5894 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPALLONE, ARLENE, , ,**

Mailing Address 5925 BRAE BURN CIR

City  
VERO BEACHState  
FLZip Code  
32967-5277FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.16

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731629**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733996**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

764.59

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733998**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5895 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733999

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734002

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734004

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5896 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734005

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPANN, CYNTHIA, , MRS.,**

Mailing Address 6820 RICKWOOD DR

City  
PENSACOLAState  
FLZip Code  
32526-8078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734012

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPEH, SHIRLEY, , ,**

Mailing Address 6799 DRAGONFLY LANE SW

City  
ALBUQUERQUEState  
NMZip Code  
87105-4078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731615

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

79.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5897 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPEIGHT, CAROL, E., ,**

Mailing Address 1421 HWY 641 SOUTH

City  
PARISState  
TNZip Code  
38242-6750FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734173**

Amount of Each Receipt this Period

34.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPEIGHT, CAROL, E., ,**

Mailing Address 1421 HWY 641 SOUTH

City  
PARISState  
TNZip Code  
38242-6750FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734398**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPENCE, KATHRYN, , MS.,**

Mailing Address 1301 LARYN LN

City  
LEXINGTONState  
SCZip Code  
29072-8288FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

476.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734917**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

183.23

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5898 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPENCE, KATHRYN, , MS.,**

Mailing Address 1301 LARYN LN

City  
LEXINGTONState  
SCZip Code  
29072-8288FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734983**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPETH, JEFFREY, , ,**

Mailing Address 393 TRAVELERS RUN

City  
BURLINGTONState  
WIZip Code  
53105-3901FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734999**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPRINGER, TOM, , ,**

Mailing Address 147 KELCIA CIRCLE

City  
PAGOSA SPRINGSState  
COZip Code  
81147-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733027**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

218.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5899 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STAKELY, JOYCE, , ,**

Mailing Address 1411 PLUM NELLY ROAD

City  
RISING FAWNState  
GAZip Code  
30738-4108FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732554

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STAKELY, JOYCE, , ,**

Mailing Address 1411 PLUM NELLY ROAD

City  
RISING FAWNState  
GAZip Code  
30738-4108FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736881

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STAKELY, JOYCE, , ,**

Mailing Address 1411 PLUM NELLY ROAD

City  
RISING FAWNState  
GAZip Code  
30738-4108FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736891

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5900 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STAMATIADIS, CONNIE, , ,**

Mailing Address 38-21 31 STREET

City  
LONG ISLAND CITYState  
NYZip Code  
11101-2718FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736465**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STANFORD, DRUE, , ,**

Mailing Address 323 COUNTY ROAD 112 EAST

City  
PECOSState  
TXZip Code  
79772-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736662**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STANLEY, NORVAL, , MS., III**

Mailing Address P.O. BOX 3018

City  
ACUSHNETState  
MAZip Code  
02743-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BERGIES SEAFOODOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735931**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

304.10



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5901 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STARLEY, PATRICK, , ,**

Mailing Address 3801 N CAPITAL OF TEXAS HWY

City  
AUSTINState  
TXZip Code  
78746-1415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LSCPOccupation (for Individual)  
PRIVATE EQUITY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736588

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEBBINS, TAMMY, , ,**

Mailing Address 1616 VICTORY COURT

City  
PROSPECTState  
KYZip Code  
40059-9175FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SPEECH PATHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734183

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEINER, DAN, , ,**

Mailing Address 1505 FOREST PARK AVE

City  
VALPARAISOState  
INZip Code  
46385-3361FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DAN STEINEROccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

698.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735003

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

453.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5902 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STERN, JUAN, , DR.,**Mailing Address 1000 UPTOWN PARK BLVD  
APT 261City  
HOUSTONState  
TXZip Code  
77056-3243FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733423**

Amount of Each Receipt this Period

332.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, SHARON, , ,**

Mailing Address 105 HALLMARK XING

City  
ROCK HILLState  
SCZip Code  
29732-7650FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734992**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STIEL, HUGH, , ,**

Mailing Address 601 N FORT LAUDETDAL BLVD

City  
FORT LAUDERDALEState  
FLZip Code  
33304-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

227.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731931**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

471.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5903 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STOWELL, FRANK, , ,**

Mailing Address 31 NORTHLAND DR.

City  
DECATURState  
ILZip Code  
62526-2345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736297**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOWELL, FRANK, , ,**

Mailing Address 31 NORTHLAND DR.

City  
DECATURState  
ILZip Code  
62526-2345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736312**

Amount of Each Receipt this Period

47.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOWELL, FRANK, , ,**

Mailing Address 31 NORTHLAND DR.

City  
DECATURState  
ILZip Code  
62526-2345FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

444.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736581**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

222.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5904 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRAWBRIDGE, ROBERT, ALLEN, MR.,**

Mailing Address 120 VISION PARK BLVD 143

City  
CONROEState  
TXZip Code  
77384-3022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732178**

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRAWBRIDGE, ROBERT, ALLEN, MR.,**

Mailing Address 120 VISION PARK BLVD 143

City  
CONROEState  
TXZip Code  
77384-3022FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.28

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732205**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRIMPLE, EARL, O., DR.,**Mailing Address 6200 OREGON AVE NW  
APT 303City  
WASHINGTONState  
DCZip Code  
20015-1538FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735906**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

143.65

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5905 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STUARD, KATHRYN, , ,**

Mailing Address 1140 N US HWY 377

City  
JUNCTIONState  
TXZip Code  
76849-6537FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733523**

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STUBBLEFIELD, DOTTIE, , ,**

Mailing Address 1265 CHARTRES

City  
KAUFMANState  
TXZip Code  
75142-4473FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731620**

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735007**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.73

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5906 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STURTZ, MARK, , ,**

Mailing Address 167 EAST JOHNSON LAKE ROAD

City  
GWINNState  
MIZip Code  
49841-9045FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1385.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735161

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUBOWICZ, DEBRA, , ,**

Mailing Address 20976 TOBACCO SQUARE

City  
ASHBURNState  
VAZip Code  
20147-4612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734597

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUDLIK, DANIEL, , ,**

Mailing Address 18 LIMESTONE RD

City  
ARMONKState  
NYZip Code  
10504-2305FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

316.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735843

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5907 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SULLIVAN, LORI, , ,**

Mailing Address 1061 SUNNYBROOK CIRCLE

City  
BASSETTState  
VAZip Code  
24055-3291FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732644

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUMNET, JASPER, , ,**

Mailing Address 825 KENTUCKY STREET

City  
GRAHAMState  
TXZip Code  
76450-3512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735662

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUSI, ROGER, , ,**

Mailing Address 4099 SCARLET IRIS PL

City  
WINTER PARKState  
FLZip Code  
32792-9412FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IRADIMED CORPOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733152

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

381.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5908 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAFFINDER, JANIECE, A., MS.,**

Mailing Address 3504 DRY BROOK CROSSING

City  
PFLUGERVILLEState  
TXZip Code  
78660-5581FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731550**

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, JILL, K., MRS.,**

Mailing Address 10455 O'BRIEN CREEK ROAD

City  
MISSOULAState  
MTZip Code  
59804-5849FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733037**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, LYNNA, , ,**

Mailing Address 10305 N. GOLDEN OAK LN

City  
HIGHLANDState  
UTZip Code  
84003-9441FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731561**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.03



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5909 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, PEGGY, , ,**

Mailing Address 13320 NEW DELAWARE ROAD

City  
MOUNT VERNONState  
OHZip Code  
43050-9138FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736339**

Amount of Each Receipt this Period

2.85

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TEMPLETON, GREG, , ,**

Mailing Address 13309 DESERT FLOWER PLACE NE

City  
ALBUQUERQUEState  
NMZip Code  
87111-5509FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SGWSOccupation (for Individual)  
EVP GM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735078**

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THARP, MORRIS, , ,**

Mailing Address 15243 RD 192

City  
PORTERVILLEState  
CAZip Code  
93257-8967FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
E M THARP INCOccupation (for Individual)  
TRUCKS DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

742.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733646**

Amount of Each Receipt this Period

247.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

299.85

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5910 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, BONNIE, , ,**

Mailing Address 115 HOLBROOK DR.

City  
HUNTSVILLEState  
ALZip Code  
35806-4084FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.95

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731745**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THRASHER, MICHAEL, , ,**

Mailing Address 153 COVENTRY LAKE DRIVE

City  
LEXINGTONState  
SCZip Code  
29072-2761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GUARDIAN FENCE, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.67

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732342**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THRASHER, MICHAEL, , ,**

Mailing Address 153 COVENTRY LAKE DRIVE

City  
LEXINGTONState  
SCZip Code  
29072-2761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GUARDIAN FENCE, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

945.67

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732347**

Amount of Each Receipt this Period

4.95

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.98

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5911 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THRASHER, MICHAEL, , ,**

Mailing Address 153 COVENTRY LAKE DRIVE

City  
LEXINGTONState  
SCZip Code  
29072-2761FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GUARDIAN FENCE, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732349

Amount of Each Receipt this Period

5.21

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THRASHER, MICHAEL, , ,**

Mailing Address 153 COVENTRY LAKE DRIVE

City  
LEXINGTONState  
SCZip Code  
29072-2761FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GUARDIAN FENCE, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732351

Amount of Each Receipt this Period

9.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THRASHER, MICHAEL, , ,**

Mailing Address 153 COVENTRY LAKE DRIVE

City  
LEXINGTONState  
SCZip Code  
29072-2761FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GUARDIAN FENCE, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

945.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732353

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5912 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THRASHER, MICHAEL, , ,**

Mailing Address 153 COVENTRY LAKE DRIVE

City  
LEXINGTONState  
SCZip Code  
29072-2761FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GUARDIAN FENCE, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732355**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRASK, DANNY, D., MR.,**

Mailing Address 30 SIR LAWRENCE DR.

City  
BELLEVILLEState  
ILZip Code  
62221-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731685**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRASK, DANNY, D., MR.,**

Mailing Address 30 SIR LAWRENCE DR.

City  
BELLEVILLEState  
ILZip Code  
62221-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

352.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735125**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5913 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRASK, DANNY, D., MR.,**

Mailing Address 30 SIR LAWRENCE DR.

City  
BELLEVILLEState  
ILZip Code  
62221-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736353

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRASK, DANNY, D., MR.,**

Mailing Address 30 SIR LAWRENCE DR.

City  
BELLEVILLEState  
ILZip Code  
62221-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736365

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRASK, DANNY, D., MR.,**

Mailing Address 30 SIR LAWRENCE DR.

City  
BELLEVILLEState  
ILZip Code  
62221-4430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

352.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736368

Amount of Each Receipt this Period

9.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5914 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRASK, DANNY, D., MR.,**

Mailing Address 30 SIR LAWRENCE DR.

City  
BELLEVILLEState  
ILZip Code  
62221-4430FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.58

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736373**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TROMBLE, RUBY, , ,**

Mailing Address 5358 SPIRIT RIDGE CT

City  
LAS CRUCESState  
NMZip Code  
88007-4988FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734411**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TULLAI, SARAH, L., MRS.,**

Mailing Address 14900 W GOLDWATER RIDGE DR.

City  
SURPRISEState  
AZZip Code  
85374-9551FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.85

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733893**

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

165.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5915 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TUNALI, ANN, , ,**

Mailing Address 7511 AUDEN TRAIL

City  
ATLANTAState  
GAZip Code  
30350-5002FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.96

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

Transaction ID : SA11A.27734384

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TUNALI, ANN, , ,**

Mailing Address 7511 AUDEN TRAIL

City  
ATLANTAState  
GAZip Code  
30350-5002FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.96

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

Transaction ID : SA11A.27734387

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TUNALI, ANN, , ,**

Mailing Address 7511 AUDEN TRAIL

City  
ATLANTAState  
GAZip Code  
30350-5002FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

353.96

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

Transaction ID : SA11A.27734389

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5916 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TUNALI, ANN, , ,**

Mailing Address 7511 AUDEN TRAIL

City  
ATLANTAState  
GAZip Code  
30350-5002FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734407**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TURNBOUGH, JESSICA, , ,**

Mailing Address 117 ASHLAND AVE

City  
MEDFORDState  
ORZip Code  
97504-7522FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735110**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TURNER, WALEAH, , ,**

Mailing Address 501 FOREST RIDGE

City  
BROKEN ARROWState  
OKZip Code  
74014-6963FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

456.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736369**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

240.54



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5917 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TUTHILL, JOHN, A., MR.,**

Mailing Address 20413 W. 56TH AVE.

City  
GOLDENState  
COZip Code  
80403-8004FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732090

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TYPER, DONALD, R., MR.,**

Mailing Address 410 N WEAVER ST

City  
HESSTONState  
KSZip Code  
67062-9041FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLC REALESTATE SERVICESOccupation (for Individual)  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733051

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ULM, DON, , ,**

Mailing Address PO BOX 1398

City  
TACNAState  
AZZip Code  
85352-1398FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736265

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5918 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. URBANO, LOURDES, , MRS.,**

Mailing Address 119 BRADLEE STREET

City  
HYDE PARKState  
MAZip Code  
02136-2225FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JOHN HANCOCKOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733960**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VALLEY, VIRGINIA, , ,**

Mailing Address 1401 EAST BAY AVE

City  
NEWPORT BEACHState  
CAZip Code  
92661-1428FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735546**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN DE POL, HENDRIK, , MR.,**

Mailing Address 2225 LIVINGSTON LN

City  
STOCKTONState  
CAZip Code  
95210-3626FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

352.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732393**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

209.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5919 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731628**

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.29

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732059**

Amount of Each Receipt this Period

0.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN LANDEGEND, JUDITH, , ,**

Mailing Address 15116 TAURUS CUR

City  
PORT CHARLOTTEState  
FLZip Code  
33981-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

560.29

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734783**

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.79

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5920 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAN ZANDT, LEE, A., ,**

Mailing Address 21630E 103 ST SOUTH

City  
BROKEN ARROWState  
OKZip Code  
74014-3655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731648

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VANDERHELM, GORDON, , ,**

Mailing Address 3771 E TEAL COVE CT

City  
HERNANDOState  
FLZip Code  
34442-5590FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736231

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VASEK, GARY, R., MR.,**

Mailing Address 6387 ASHCROFT DR.

City  
COLORADO SPRINGSState  
COZip Code  
80918-3241FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.85

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732583

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.15

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5921 OF 6441

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VASEK, GARY, R., MR.,

Mailing Address 6387 ASHCROFT DR.

City  
COLORADO SPRINGSState  
COZip Code  
80918-3241FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736775

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VENNUM, PAULINE, , ,

Mailing Address 150 E ROBINSON ST. UNIT 2201

City  
ORLANDOState  
FLZip Code  
32801-4360FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734818

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VERDUN, MARGARET, , ,

Mailing Address 16095 LAMBRUSCO WAY

City  
FISHERSState  
INZip Code  
46037-7372FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

295.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736302

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

150.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5922 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VEST, JUDY, , ,**

Mailing Address 4146 LONE OAK DR

City  
ROBSTOWNState  
TXZip Code  
78380-5853FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735562

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VLIET, KIRSTEN, , ,**

Mailing Address 3300 BEE CAVE RD

City  
WEST LAKE HILLSState  
TXZip Code  
78746-6600FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BICOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735639

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VOGEL, DAVID, , ,**

Mailing Address 1411 BURNHAM COURT

City  
JACKSONState  
NJZip Code  
08527-3206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENVISIONOccupation (for Individual)  
HEALTHCARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733197

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

238.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5923 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VOLK, BEVERLY, , ,**

Mailing Address 1511 RED MAPLE LANE

City  
ALLENTOWNState  
PAZip Code  
18104-2011FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.43

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735401**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VON SCHIMMELMANN, KAREN, , ,**

Mailing Address 12521 GRITSTONE DRIVE

City  
DENTONState  
TXZip Code  
76207-5747FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734271**

Amount of Each Receipt this Period

3.12

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WADE, DWIGHT, , ,**

Mailing Address 416 KINGSTON PARK DR.

City  
KNOXVILLEState  
TNZip Code  
37919-6680FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731642**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5924 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WAER, DANA, , ,**Mailing Address 18543 DEVONSHIRE STREET  
251City  
NORTHRIDGEState  
CAZip Code  
91324-1308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733015**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WAER, DANA, , ,**Mailing Address 18543 DEVONSHIRE STREET  
251City  
NORTHRIDGEState  
CAZip Code  
91324-1308FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734026**

Amount of Each Receipt this Period

78.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALDEN, JAMES, A., ,**

Mailing Address 10404 BRIARWOOD CIR

City  
GREENVILLEState  
TXZip Code  
75402-3300FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736327**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

228.08



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5925 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALLACE, DEBRA, , ,**

Mailing Address P.O. BOX 197

City  
MIDLANDState  
TXZip Code  
79702-0197FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735928**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALLACE, FRANK, , ,**

Mailing Address 2496 BIRNAM WOODS WAY

City  
GAINESVILLEState  
FLZip Code  
32605-1620FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736144**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALLS, DIANE JANE, , ,**

Mailing Address 1882 VISTA HILLS DR.

City  
NAVASOTAState  
TXZip Code  
77868-6966FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

697.50

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735524**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5926 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALLS, DIANE JANE, , ,**

Mailing Address 1882 VISTA HILLS DR.

City  
NAVASOTAState  
TXZip Code  
77868-6966FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.50

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735537**

Amount of Each Receipt this Period

9.37

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALLS, DIANE JANE, , ,**

Mailing Address 1882 VISTA HILLS DR.

City  
NAVASOTAState  
TXZip Code  
77868-6966FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.50

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735538**

Amount of Each Receipt this Period

8.91

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALLS, DIANE JANE, , ,**

Mailing Address 1882 VISTA HILLS DR.

City  
NAVASOTAState  
TXZip Code  
77868-6966FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

697.50

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735541**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53.28

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5927 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALLS, DIANE JANE, , ,**

Mailing Address 1882 VISTA HILLS DR.

City  
NAVASOTAState  
TXZip Code  
77868-6966FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.50

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735554**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALSH, MIKE, , ,**

Mailing Address 1775 BOULDER RIDGE TRAIL

City  
RENOState  
NVZip Code  
89523-3922FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735171**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WARFIELD, DONNA, , ,**

Mailing Address 29 DOWNSHIRE LANE

City  
DECATURState  
GAZip Code  
30033-1415FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

306.09

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733194**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5928 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WARREN, BRIAN, , ,**

Mailing Address 1621 JULIESSE AVE

City  
SACRAMENTOState  
CAZip Code  
95815-1821FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSTRUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733176

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WARREN, BRIAN, , ,**

Mailing Address 1621 JULIESSE AVE

City  
SACRAMENTOState  
CAZip Code  
95815-1821FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSTRUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27733835

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WARREN, GERALDINE, , ,**

Mailing Address 1075 CANTER ROAD NORTHEAST

City  
ATLANTAState  
GAZip Code  
30324-2554FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732528

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5929 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATKINS, DONNA, G., ,**

Mailing Address 510 OTTO POLK RD

City  
FROSTPROOFState  
FLZip Code  
33843-9423FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.77

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731810

Amount of Each Receipt this Period

0.30

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATKINS, DONNA, G., ,**

Mailing Address 510 OTTO POLK RD

City  
FROSTPROOFState  
FLZip Code  
33843-9423FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.77

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731811

Amount of Each Receipt this Period

0.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATKINS, DONNA, G., ,**

Mailing Address 510 OTTO POLK RD

City  
FROSTPROOFState  
FLZip Code  
33843-9423FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.77

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731812

Amount of Each Receipt this Period

0.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5930 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATKINS, DONNA, G., ,**

Mailing Address 510 OTTO POLK RD

City  
FROSTPROOFState  
FLZip Code  
33843-9423FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736532**

Amount of Each Receipt this Period

31.23

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATSON, ANDREW, , ,**

Mailing Address 13 MIDWAY LANE

City  
EWINGState  
NJZip Code  
08628-1432FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BRISTOL MYERS SQUIBBOccupation (for Individual)  
COMPETITIVE INTELLIGENCE STRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736176**

Amount of Each Receipt this Period

1.11

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATSON, CHRISTOPHER, K., ,**

Mailing Address 4388 MAVERICK LN NW

City  
KENNESAWState  
GAZip Code  
30152-3950FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733436**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

67.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5931 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEBB, ROSS, A., MR.,**

Mailing Address 6312 N LE MAI AVE.

City  
CHICAGOState  
ILZip Code  
60646-4828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733211**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEBB, ROSS, A., MR.,**

Mailing Address 6312 N LE MAI AVE.

City  
CHICAGOState  
ILZip Code  
60646-4828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734400**

Amount of Each Receipt this Period

34.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEBB, ROSS, A., MR.,**

Mailing Address 6312 N LE MAI AVE.

City  
CHICAGOState  
ILZip Code  
60646-4828FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

822.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736138**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5932 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEBER, KATHERINE, , ,**

Mailing Address 6501 TAUTON ROAD NORTHWEST

City  
ALBUQUERQUEState  
NMZip Code  
87120-2062FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736467**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEBER, MARK, , ,**

Mailing Address 3540 ASPEN WAY

City  
MELBOURNEState  
FLZip Code  
32934-7602FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NORTHROP GRUMMANOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27731633**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEISS, NATHAN, , ,**

Mailing Address 19443 WATERS CURVE WAY

City  
BOCA RATONState  
FLZip Code  
33434-5118FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733859**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

258.20



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5933 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELLS, BUTCH, , ,**

Mailing Address 975 HOLIDAY DR.

City  
MOUNTAIN HOMEState  
IDZip Code  
83647-2322FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27734369**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WELLS, JOSEPH, , MR., JR.**Mailing Address 151 FAIRVIEW DR.  
APT 358City  
LITITZState  
PAZip Code  
17543-8164FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733686**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELLS, KESSA, , ,**

Mailing Address 686 LISMORE LANE

City  
NAPLESState  
FLZip Code  
34108-8562FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

548.10

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733292**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

209.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5934 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELLS, KESSA, , ,**

Mailing Address 686 LISMORE LANE

City  
NAPLESState  
FLZip Code  
34108-8562FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733363**

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WELTON, DEBRA, , ,**Mailing Address 1522 E BROADWAY  
APT DCity  
MOUNT VERNONState  
WAZip Code  
98274-4513FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732649**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEST, WILLIS, , ,**

Mailing Address 4826 CR 513

City  
STEPHENVILLEState  
TXZip Code  
76401-6887FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736398**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5935 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732098**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTCOTT, ANNE, , MRS.,**

Mailing Address 18796 LAKE FOREST DR

City  
PENN VALLEYState  
CAZip Code  
95946-9458FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3639.31

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733020**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WESTFALL, ANNE, , ,**

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIAState  
WAZip Code  
98531-8894FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

479.93

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732308**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

607.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5936 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WESTFALL, ANNE, , ,**

Mailing Address 1426 STILLWATERS AVENUE

City  
CENTRALIAState  
WAZip Code  
98531-8894FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734540**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITE, JACOB, W., MR.,**

Mailing Address 426 MAY ST

City  
JENNINGSState  
LAZip Code  
70546-4840FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736316**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITE, PATRICIA, J., ,**

Mailing Address 23295 HARBOR LIGHT CIRCLE

City  
ABINGDONState  
VAZip Code  
24211-5515FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733795**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.51

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5937 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITLEY, JEFFREY, , ,**

Mailing Address 8890 ABBOTSFORD TERRACE

City  
FORT MYERSState  
FLZip Code  
33912-2449FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736118**

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITEMORE, BEBE, , ,**

Mailing Address 4785 MURFREESBORO ROAD

City  
ARRINGTONState  
TNZip Code  
37014-9171FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734321**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITTEN, JAMES, , MR.,**

Mailing Address P.O. BOX 860

City  
MATEWANState  
WVZip Code  
25678-0860FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MODERN ENGEOccupation (for Individual)  
PROJECT COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731553**

Amount of Each Receipt this Period

48.93

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

188.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5938 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WICKER, DUANE, , MR.,**

Mailing Address 4447 LAVENDER LN

City  
PAHRUMPState  
NVZip Code  
89061-0135FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735113

Amount of Each Receipt this Period

19.80

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WICKLINE, RICHARD, , ,**Mailing Address 1125 MCGEE CT NE  
UNIT 372City  
SALEMState  
ORZip Code  
97303-9469FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27731579

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILKINS, BELINDA, , ,**

Mailing Address 1105 RATLIFF ST

City  
OZONAState  
TXZip Code  
76943-4455FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

412.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735984

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

109.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5939 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, ANGELA, , ,**

Mailing Address 1545 NORTH OCEAN WAY

City  
PALM BEACHState  
FLZip Code  
33480-3050FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732754**

Amount of Each Receipt this Period

41.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, CATHERINE, L., ,**

Mailing Address PO BOX 127

City  
SCHERTZState  
TXZip Code  
78154-0127FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736800**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIS, MIKE, , ,**

Mailing Address 12 EATON SQUARE

City  
HOUSTONState  
TXZip Code  
77027-3109FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2031.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736358**

Amount of Each Receipt this Period

495.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

547.05

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5940 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, CHEQUITA, , ,**

Mailing Address 222BENSON ROAD

City  
GARDENDALEState  
ALZip Code  
35071-3851FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27733081**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, PHILLIP, , ,**

Mailing Address 7866 TUMBLEWEED TRL

City  
SPRINGFIELDState  
ILZip Code  
62707-4582FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PHILLIP B WILSONOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732984**

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOLF, ARTHUR, , ,**Mailing Address 7767 BRISTOL PARK DR.  
UNIT 4SWCity  
TINLEY PARKState  
ILZip Code  
60477-8717FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2605.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736092**

Amount of Each Receipt this Period

2.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.11



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5941 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOOD, REBECCA, L., MRS.,**

Mailing Address 656 NE 312 AVE

City  
OLD TOWNState  
FLZip Code  
32680-3312FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MARTEN TRUCKING CO.Occupation (for Individual)  
LONG HAUL TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736294

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOOD, RONALD, , MR.,**Mailing Address 21016 SE STARK ST  
UNIT 19City  
GRESHAMState  
ORZip Code  
97030-2043FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734059

Amount of Each Receipt this Period

22.90

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODBURY, JOHN, B., MR.,**

Mailing Address 875 UNIVERSITY AVE.

City  
SACRAMENTOState  
CAZip Code  
95825-6724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WOODBURY ACCOUNTANCY CORP.Occupation (for Individual)  
CERTIFIED PUBLIC ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27735785

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5942 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODHOUSE, MARILYN, M., MRS.,**

Mailing Address 650 RAMBLEWOOD RD.

City  
HOUSTONState  
TXZip Code  
77079-6905FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2197.50

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733281**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODRUFF, RICHARD, , ,**Mailing Address 5430 NEW NORTHSIDE DR.  
SUITE 200City  
ATLANTAState  
GAZip Code  
30339-7424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HONDA CARLANDOccupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.03

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732631**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODRUFF, RICHARD, , ,**Mailing Address 5430 NEW NORTHSIDE DR.  
SUITE 200City  
ATLANTAState  
GAZip Code  
30339-7424FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HONDA CARLANDOccupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

401.03

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733019**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5943 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODS, BILLY, R., MR., JR.**

Mailing Address 3363 HWY 4

City  
RINGGOLDState  
LAZip Code  
71068-2942FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.04

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736094**

Amount of Each Receipt this Period

74.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODS, BILLY, R., MR., JR.**

Mailing Address 3363 HWY 4

City  
RINGGOLDState  
LAZip Code  
71068-2942FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.04

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27736128**

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOOTTEN, RIKE, , ,**Mailing Address 2100 S JOSEPHINE ST  
UNIT 4106City  
DENVERState  
COZip Code  
80210-4852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27735671**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

183.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5944 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOOTTEN, RIKE, , ,**Mailing Address 2100 S JOSEPHINE ST  
UNIT 4106City  
DENVERState  
COZip Code  
80210-4852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736821**

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, NANCY, D., MRS.,**

Mailing Address 2736 MORNING DRIVE, NE

City  
CULLMANState  
ALZip Code  
35055-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27734761**

Amount of Each Receipt this Period

4.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, RICHARD, L., ,**

Mailing Address 14416 BEACH RD.

City  
CHESTERFIELDState  
VAZip Code  
23838-2307FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

298.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735334**

Amount of Each Receipt this Period

47.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5945 OF 6441

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, RICHARD, L., ,**

Mailing Address 14416 BEACH RD.

City  
CHESTERFIELDState  
VAZip Code  
23838-2307FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735338**

Amount of Each Receipt this Period

52.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WROBEL, PATRICIA, , ,**

Mailing Address 6843 WESTCHESTER CIRCLE

City  
BRADENTONState  
FLZip Code  
34202-9231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731681**

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YATES SMITH, SHARI, , MS.,**

Mailing Address P.O. BOX 2377

City  
RUIDOSOState  
NMZip Code  
88355-2377FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MYCO IND. INC.Occupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

14647.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732243**

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1188.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5946 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YATES SMITH, SHARI, , MS.,**

Mailing Address P.O. BOX 2377

City  
RUIDOSOState  
NMZip Code  
88355-2377FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MYCO IND. INC.Occupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14647.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732298**

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YATES, SYLVIA, , ,**

Mailing Address 4107 N ALABAMA ST

City  
LOXLEYState  
ALZip Code  
36551-4533FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27731625**

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YEARY, WILLIE, , MR.,**

Mailing Address 300 S WHEELER ST

City  
JASPERState  
TXZip Code  
75951-4536FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27735251**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1099.77

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5947 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YENSEL, PATRICIA, , ,**

Mailing Address 4811 RASPBERRY CIRCLE

City  
RAVENNAState  
OHZip Code  
44266-7843FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732367

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNG, DIANE, , ,**

Mailing Address 1756 PORTAL WAY

City  
SANDYState  
UTZip Code  
84093-6831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27732887

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YOUNG, PATRICIA, , ,**

Mailing Address 9940 PREMIERE VIEW CIR

City  
HAGERSTOWNState  
MDZip Code  
21740-8904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27736081

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5948 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNG, PATRICIA, , ,**

Mailing Address 9940 PREMIERE VIEW CIR

City  
HAGERSTOWNState  
MDZip Code  
21740-8904FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27736101**

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YURRITA, LEZLIE, , ,**

Mailing Address PO BOX 207

City  
BANDERAState  
TXZip Code  
78003-0207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732336**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZAHORIAN, GEORGE, , , III**

Mailing Address 475 WEST GOVERNOR ROAD

City  
HERSHEYState  
PAZip Code  
17033-2217FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
COCOA UROLOGY ASSOCIATESOccupation (for Individual)  
SURGEON UROLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11A.27732012**

Amount of Each Receipt this Period

35.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.49



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5949 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZAMORA, DUCELLA, , ,**

Mailing Address 1287 W CALLE PLAYA DE SIESTA

City  
SAHUARITAState  
AZZip Code  
85629-8048FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.48

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27732896**

Amount of Each Receipt this Period

36.44

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZAVARZINA, ANYA, , ,**

Mailing Address 802 N DELAWARE ST, 211

City  
SAN MATEOState  
CAZip Code  
94401-1514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GALLIUM ARTISTIC SERVICES SIMSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.60

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733360**

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZAVARZINA, ANYA, , ,**

Mailing Address 802 N DELAWARE ST, 211

City  
SAN MATEOState  
CAZip Code  
94401-1514FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GALLIUM ARTISTIC SERVICES SIMSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

811.60

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025**Transaction ID : SA11A.27733383**

Amount of Each Receipt this Period

71.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

110.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5950 OF 6441

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZINN, WARREN, , ,

Mailing Address 2300 N.E. 151 STREET

City  
NORTH MIAMIState  
FLZip Code  
33181-3625FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WARREN HENRY AUTO GROUPOccupation (for Individual)  
AUTOMOBILE DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1041.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA11A.27734128

Amount of Each Receipt this Period

520.51

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

520.51

1824980.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5951 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AARON BEAN FOR CONGRESS**

Mailing Address 2640A MITCHAM DRIVE

City  
TALLAHASSEEState  
FLZip Code  
32308-5400FEC ID number of contributing  
federal political committee.**C**

C00816983

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11C.27763560**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ASHLEY HINSON FOR CONGRESS**

Mailing Address P.O. BOX 811

City  
MARIONState  
IAZip Code  
52302-0811FEC ID number of contributing  
federal political committee.**C**

C00706267

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

90000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11C.27744236**

Amount of Each Receipt this Period

90000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AUSTIN SCOTT FOR CONGRESS, INC.**

Mailing Address P.O. BOX 2530

City  
TIFTONState  
GAZip Code  
31793-2530FEC ID number of contributing  
federal political committee.**C**

C00482737

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11C.27744248**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

215000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5952 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLE FOR CONGRESS**

Mailing Address P.O. BOX 722256

City  
NORMANState  
OKZip Code  
73070-8705FEC ID number of contributing  
federal political committee.**C**

C00379735

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

89480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

**Transaction ID : SA11C.27744210**

Amount of Each Receipt this Period

89480.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMMER FOR CONGRESS**

Mailing Address P.O. BOX 998

City  
ANOKAState  
MNZip Code  
55303-0998FEC ID number of contributing  
federal political committee.**C**

C00545749

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

**Transaction ID : SA11C.27744264**

Amount of Each Receipt this Period

500000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIKE JOHNSON FOR LOUISIANA**Mailing Address C/O 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314-5404FEC ID number of contributing  
federal political committee.**C**

C00608695

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

227000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2025

**Transaction ID : SA11C.27763568**

Amount of Each Receipt this Period

227000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

816480.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5953 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ABBVIE POLITICAL ACTION COMMITTEE**Mailing Address 1399 NEW YORK AVENUE NW  
SUITE 200City  
WASHINGTONState  
DCZip Code  
20005-4732FEC ID number of contributing  
federal political committee.**C** C00536573

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11C.27763557**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALLIED PILOTS ASSOCIATION PAC**Mailing Address 14600 TRINITY BLVD  
SUITE 500City  
FORT WORTHState  
TXZip Code  
76155-2559FEC ID number of contributing  
federal political committee.**C** C00267849

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11C.27744243**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALTRIA GROUP, INC. PAC**Mailing Address 101 CONSTITUTION AVENUE NW  
SUITE 400WCity  
WASHINGTONState  
DCZip Code  
20001-2155FEC ID number of contributing  
federal political committee.**C** C00089136

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11C.27744204**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5954 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION PAC**

Mailing Address 1201 PENNSYLVANIA AVE NW

City  
WASHINGTONState  
DCZip Code  
20004-2401FEC ID number of contributing  
federal political committee.**C** C00359539

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11C.27715756**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMERICAN ACADEMY OF AUDIOLOGY INC. PAC**Mailing Address 11480 COMMERCE PARK DR  
STE 220City  
RESTONState  
VAZip Code  
20191-1518FEC ID number of contributing  
federal political committee.**C** C00342972

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11C.27744225**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMERICAN BANKERS ASSOCIATION PAC**Mailing Address 1333 NEW HAMPSHIRE AVE NW  
STE 700City  
WASHINGTONState  
DCZip Code  
20036-1532FEC ID number of contributing  
federal political committee.**C** C00004275

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11C.27744227**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5955 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMERICAN COLLEGE OF CARDIOLOGY PAC**

Mailing Address 2400 N STREET, NW

City  
WASHINGTONState  
DCZip Code  
20037-1153FEC ID number of contributing  
federal political committee.**C**

C00375360

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11C.27715741**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIATION PAC**Mailing Address 20 F STREET NW  
SUITE 1000City  
WASHINGTONState  
DCZip Code  
20001-6701FEC ID number of contributing  
federal political committee.**C**

C00382424

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11C.27715743**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMERICAN COLLEGE OF RADIOLOGY ASSN. PAC**

Mailing Address 44211 SLATESTONE CT

City  
LEESBURGState  
VAZip Code  
20176-5109FEC ID number of contributing  
federal political committee.**C**

C00343459

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11C.27715750**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

45000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5956 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)**Mailing Address 1400 L ST NW  
STE 400City  
WASHINGTONState  
DCZip Code  
20005-3592FEC ID number of contributing  
federal political committee.**C** C00010868

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA11C.27744201**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMERICAN HOSPITAL ASSOCIATION PAC**Mailing Address 800 10TH ST NW  
STE 400City  
WASHINGTONState  
DCZip Code  
20001-5189FEC ID number of contributing  
federal political committee.**C** C00106146

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11C.27744223**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE PAC**

Mailing Address 251 H STREET, NW

City  
WASHINGTONState  
DCZip Code  
20001-2604FEC ID number of contributing  
federal political committee.**C** C00797670

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA11C.27715755**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45000.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5957 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC**Mailing Address 1455 PENNSYLVANIA AVE. NW  
SUITE 400City  
WASHINGTONState  
DCZip Code  
20004-1017FEC ID number of contributing  
federal political committee.**C** C00077321

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11C.27744215**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMERICAN MARITIME OFFICERS VOLUNTARY PAC**Mailing Address 700 PENNSYLVANIA AVE SE  
STE 530City  
WASHINGTONState  
DCZip Code  
20003-2493FEC ID number of contributing  
federal political committee.**C** C00027532

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11C.27744214**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AMERICANS FOR THE ARTS ACTION FUND**Mailing Address 1000 VERMONT AVENUE NORTHWEST  
FLOOR 6City  
WASHINGTONState  
DCZip Code  
20005-4940FEC ID number of contributing  
federal political committee.**C** C00410126

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11C.27744224**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

31000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5958 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMGEN INC. POLITICAL ACTION COMMITTEE**

Mailing Address 601 13TH ST NW FLOOR 12

City  
WASHINGTONState  
DCZip Code  
20005-3819FEC ID number of contributing  
federal political committee.**C**

C00251876

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11C.27701752

Amount of Each Receipt this Period

- 15000.00

☐ Memo Item

CONTRIBUTION

2025 AGGREGATE; RETURNED CHECK; DEBIT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARNOLD & PORTER KAYE SCHOLER LLP (APKS) PARTNERS PAC**

Mailing Address 555 12TH STREET, NW

City  
WASHINGTONState  
DCZip Code  
20004-1200FEC ID number of contributing  
federal political committee.**C**

C00216895

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

Transaction ID : SA11C.27715736

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAE SYSTEMS PAC**

Mailing Address 2941 FAIRVIEW PARK DR.

City  
FALLS CHURCHState  
VAZip Code  
22042-4522FEC ID number of contributing  
federal political committee.**C**

C00281212

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA11C.27744237

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

15000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5959 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEST BUY EMPLOYEE POLITICAL FORUM**

Mailing Address 7601 PENN AVE. S.

City  
RICHFIELDState  
MNZip Code  
55423-8500FEC ID number of contributing  
federal political committee.**C**

C00405076

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

**Transaction ID : SA11C.27715757**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRETT PAC**

Mailing Address 504 DEREK AVENUE

City  
ELIZABETHTOWNState  
KYZip Code  
42701-9168FEC ID number of contributing  
federal political committee.**C**

C00483487

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2025

**Transaction ID : SA11C.27763574**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWNSTEIN HYATT & FARBER P.C. PAC**Mailing Address 1155 F ST NW  
STE 1200City  
WASHINGTONState  
DCZip Code  
20004-1329FEC ID number of contributing  
federal political committee.**C**

C00390583

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

**Transaction ID : SA11C.27715754**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

35000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5960 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BWX TECHNOLOGIES, INC POLITICAL ACTION COMMITTEE**

Mailing Address 2016 MT ATHOS RD

City  
LYNCHBURGState  
VAZip Code  
24504-5447FEC ID number of contributing  
federal political committee.**C**

C00365502

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11C.27763579**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CITIGROUP INC. PAC- FEDERAL**

Mailing Address 1101 PENNSYLVANIA NW SUITE 1000

City  
WASHINGTONState  
DCZip Code  
20004-2524FEC ID number of contributing  
federal political committee.**C**

C00008474

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11C.27744211**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COMMUNITY HEALTH SYSTEMS CHS PAC**

Mailing Address 4000 MERIDIAN BOULEVARD

City  
FRANKLINState  
TNZip Code  
37067-6325FEC ID number of contributing  
federal political committee.**C**

C00485896

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11C.27744222**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

45000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5961 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONSUMER TECHNOLOGY ASSOCIATION PAC**

Mailing Address 1919 SOUTH EADS STREET

City  
ARLINGTONState  
VAZip Code  
22202-3028FEC ID number of contributing  
federal political committee.**C**

C00375048

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2025**Transaction ID : SA11C.27744197**

Amount of Each Receipt this Period

15000.00

☐

Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COX ENTERPRISES PAC (COXPAC) INC**Mailing Address 975 F STREET, NW  
SUITE 300City  
WASHINGTONState  
DCZip Code  
20004-1459FEC ID number of contributing  
federal political committee.**C**

C00477653

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11C.27789051**

Amount of Each Receipt this Period

15000.00

☐

Memo Item

CONTRIBUTION

\$15000 REFUNDED 2/10/25

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CREDIT UNION NATIONAL ASSOCIATION PAC**Mailing Address 99 M ST SE  
STE 300City  
WASHINGTONState  
DCZip Code  
20003-3957FEC ID number of contributing  
federal political committee.**C**

C00007880

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11C.27744242**

Amount of Each Receipt this Period

15000.00

☐

Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

45000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5962 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CROWE PAC**

Mailing Address 3815 RIVER CROSSING PKWY

City  
INDIANAPOLISState  
INZip Code  
46240-7746FEC ID number of contributing  
federal political committee.**C** C00451518

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11C.27763554**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DELL TECHNOLOGIES POLITICAL ACTION COMMITTEE**Mailing Address 440 FIRST ST, NW  
SUITE 820City  
WASHINGTONState  
DCZip Code  
20001-3033FEC ID number of contributing  
federal political committee.**C** C00369751

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11C.27744217**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DELOITTE POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 365

City  
WASHINGTONState  
DCZip Code  
20044-0365FEC ID number of contributing  
federal political committee.**C** C00211318

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11C.27744221**

Amount of Each Receipt this Period

7500.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5963 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELEVANCE HEALTH, INC. POLITICAL ACTION COMMITTEE**Mailing Address 1001 PENNSYLVANIA AVE NW  
STE 710City  
WASHINGTONState  
DCZip Code  
20004-2513FEC ID number of contributing  
federal political committee.**C** C00197228

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11C.27715746**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENTERGY PAC (ENPAC)**Mailing Address 101 CONSTITUTION AVENUE, NW  
SUITE 200 EASTCity  
WASHINGTONState  
DCZip Code  
20001-2133FEC ID number of contributing  
federal political committee.**C** C00363879

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11C.27744235**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FEDEX CORPORATION PAC**

Mailing Address 942 S SHADY GROVE RD

City  
MEMPHISState  
TNZip Code  
38120-4117FEC ID number of contributing  
federal political committee.**C** C00068692

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11C.27744213**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5964 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FEDEX CORPORATION PAC**

Mailing Address 942 S SHADY GROVE RD

City  
MEMPHISState  
TNZip Code  
38120-4117FEC ID number of contributing  
federal political committee.**C**

C00068692

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11C.27763555**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FIGHT ON PAC**

Mailing Address P.O. BOX 811

City  
MARIONState  
IAZip Code  
52302-0811FEC ID number of contributing  
federal political committee.**C**

C00762328

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA11C.27744234**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FINSECA PAC**Mailing Address 600 13TH STREET NW  
SUITE 550City  
WASHINGTONState  
DCZip Code  
20005-3029FEC ID number of contributing  
federal political committee.**C**

C00447565

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11C.27744256**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

30000.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5965 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FIRSTENERGY PAC**

Mailing Address 76 S MAIN STREET

ATTN: TONY ALEXANDER

City  
AKRONState  
OHZip Code  
44308-1812FEC ID number of contributing  
federal political committee.**C**

C00140855

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11C.27744238**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLUOR CORPORATION PAC**

Mailing Address 403 E. CAPITOL STREET SE

City

WASHINGTON

State

DC

Zip Code

20003-3810

FEC ID number of contributing  
federal political committee.**C**

C00034132

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11C.27744254**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FORD MOTOR COMPANY CIVIC ACTION FUND**

Mailing Address 1350 I. STREET NW

SUITE 1000

City

WASHINGTON

State

DC

Zip Code

20005-7205

FEC ID number of contributing  
federal political committee.**C**

C00046474

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11C.27763577**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

45000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5966 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRESENIUS MEDICAL CARE NORTH AMERICA PAC**Mailing Address 801 PENNSYLVANIA AVENUE NW  
SUITE 255City  
WASHINGTONState  
DCZip Code  
20004-3637FEC ID number of contributing  
federal political committee.**C** C00401299

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11C.27763582**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGI**

Mailing Address 1750 NEW YORK AVE NW

City  
WASHINGTONState  
DCZip Code  
20006-5301FEC ID number of contributing  
federal political committee.**C** C00029447

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA11C.27744226**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. INTERNATIONAL FRANCHISE ASSOCIATION PAC**Mailing Address 1900 K. ST NW  
STE 700City  
WASHINGTONState  
DCZip Code  
20006-1135FEC ID number of contributing  
federal political committee.**C** C00084491

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11C.27744255**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5967 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JUMP INTO ACTION FOR CONSERVATIVES TO KEEP OUR IDEAS PAC**

Mailing Address P.O. BOX 26141

City  
ALEXANDRIAState  
VAZip Code  
22313-6141FEC ID number of contributing  
federal political committee.**C**

C00582726

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

7243.37

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11C.27744263**

Amount of Each Receipt this Period

7243.37

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. K & L GATES, LLP PAC**

Mailing Address 1601 K STREET, NW

City  
WASHINGTONState  
DCZip Code  
20006-1682FEC ID number of contributing  
federal political committee.**C**

C00213173

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11C.27715742**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KPMG PARTNERS/PRINCIPALS AND EMPLOYEES PAC**

Mailing Address P.O. BOX 18254

City  
WASHINGTONState  
DCZip Code  
20036-8254FEC ID number of contributing  
federal political committee.**C**

C00280222

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11C.27744252**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

27243.37

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5968 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LIUNA) PAC**

Mailing Address 905 16TH ST NW

City  
WASHINGTONState  
DCZip Code  
20006-1703FEC ID number of contributing  
federal political committee.**C**

C00007922

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11C.27744207**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORGAN STANLEY PAC**Mailing Address 401 9TH STREET NW  
SUITE 650City  
WASHINGTONState  
DCZip Code  
20004-2151FEC ID number of contributing  
federal political committee.**C**

C00337626

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11C.27763580**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORTGAGE BANKERS ASSOCIATION PAC**

Mailing Address 1919 M ST NW

City  
WASHINGTONState  
DCZip Code  
20036-3521FEC ID number of contributing  
federal political committee.**C**

C00004812

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA11C.27715735**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

45000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5969 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NATIONAL BEER WHOLESALERS ASSOCIATION PAC**Mailing Address 277 S WASHINGTON ST  
STE 500City  
ALEXANDRIAState  
VAZip Code  
22314-3672FEC ID number of contributing  
federal political committee.**C** C00144766

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11C.27715744**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NATIONAL COMMUNITY PHARMACISTS ASSOCIATION PAC**

Mailing Address 100 DAINGERFIELD ROAD

City

ALEXANDRIA

State  
VAZip Code  
22314-3391FEC ID number of contributing  
federal political committee.**C** C00030809

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11C.27744205**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NATIONAL ELEVATORS CONSTRUCTORS PAC**

Mailing Address 7154 COLUMBIA GATEWAY DRIVE

City

COLUMBIA

State  
MDZip Code  
21046-2132FEC ID number of contributing  
federal political committee.**C** C00383950

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11C.27744253**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

45000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5970 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEW YORK LIFE INSURANCE PAC**Mailing Address 51 MADISON AVE  
RM 1109City  
NEW YORKState  
NYZip Code  
10010-1603FEC ID number of contributing  
federal political committee.**C**

C00158881

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11C.27744209**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NUCLEAR ENERGY INSTITUTE FEDERAL PAC**Mailing Address 1201 F STREET NW  
11TH FLOORCity  
WASHINGTONState  
DCZip Code  
20004-1217FEC ID number of contributing  
federal political committee.**C**

C00239848

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA11C.27763556**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUCOR PAC**

Mailing Address 1915 REXFORD ROAD

City  
CHARLOTTEState  
NCZip Code  
28211-3465FEC ID number of contributing  
federal political committee.**C**

C00379628

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11C.27763581**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

45000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5971 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PFIZER PAC**

Mailing Address 66 HUDSON BOULEVARD EAST

City  
NEW YORKState  
NYZip Code  
10001-2189FEC ID number of contributing  
federal political committee.**C**

C00016683

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA11C.27744239**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PNC FINANCIAL SERVICES PAC**

Mailing Address 249 FIFTH AVENUE

City  
PITTSBURGHState  
PAZip Code  
15222-2707FEC ID number of contributing  
federal political committee.**C**

C00035519

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11C.27715745**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SENIOR CARE PHARMACY COALITION PAC**Mailing Address 1700 PENNSYLVANIA AVE NW  
STE 200City  
WASHINGTONState  
DCZip Code  
20006-4700FEC ID number of contributing  
federal political committee.**C**

C00615203

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA11C.27744216**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

45000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5972 OF 6441

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. SOUTHWEST AIRLINES PILOTS' ASSOCIATION PAC**

Mailing Address 1450 EMPIRE CENTRAL DR. STE. 737

City  
DALLAS

State  
TX

Zip Code  
75247-4081

FEC ID number of contributing  
federal political committee.

**C** C00360669

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**02** / **26** / **2025**

**Transaction ID : SA11C.27744241**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. SQUIRE PATTON BOGGS PAC**

Mailing Address 2550 M ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20037-1301

FEC ID number of contributing  
federal political committee.

**C** C00401083

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**02** / **26** / **2025**

**Transaction ID : SA11C.27744240**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. SWISHER INTERNATIONAL, INC. PAC**

Mailing Address 459 E 16TH ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32206-3025

FEC ID number of contributing  
federal political committee.

**C** C00312785

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA11C.27744212**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45000.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5973 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THE GEO GROUP INC. PAC**

Mailing Address 4955 TECHNOLOGY WAY

City  
BOCA RATONState  
FLZip Code  
33431-3367FEC ID number of contributing  
federal political committee.**C**

C00382150

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11C.27763569**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TURKISH AMERICAN COALITION PAC- TAC-PAC**

Mailing Address 1032 15TH STREET NW #128

City  
WASHINGTONState  
DCZip Code  
20005-1502FEC ID number of contributing  
federal political committee.**C**

C00530865

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2025**Transaction ID : SA11C.27744251**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TURKISH COALITION CALIFORNIA PAC**

Mailing Address 525 EAST SEASIDE WAY, #101C

City  
LONG BEACHState  
CAZip Code  
90802-8019FEC ID number of contributing  
federal political committee.**C**

C00489898

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11C.27763575**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

35000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5974 OF 6441

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. U.S. BANCORP FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 950 F ST NW  
STE 750

City  
WASHINGTON

State  
DC

Zip Code  
20004-1487

FEC ID number of contributing  
federal political committee.

**C** C00488882

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**02** / **12** / **2025**

**Transaction ID : SA11C.27715758**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. UNION PACIFIC PAC**

Mailing Address 700 13TH STREET, NW  
SUITE 350

City  
WASHINGTON

State  
DC

Zip Code  
20005-6621

FEC ID number of contributing  
federal political committee.

**C** C00010470

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**02** / **18** / **2025**

**Transaction ID : SA11C.27744206**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. UNITED AIRLINES, INC. POLITICAL ACTION COMMITTEE (UAPAC)**

Mailing Address 233 S. WACKER DRIVE

City  
CHICAGO

State  
IL

Zip Code  
60606-7147

FEC ID number of contributing  
federal political committee.

**C** C00101766

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**02** / **28** / **2025**

**Transaction ID : SA11C.27763578**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5975 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WASHINGTON GAS LIGHT COMPANY PAC**Mailing Address 1000 MAINE AVENUE  
SUITE 600City  
WASHINGTONState  
DCZip Code  
20024-3496FEC ID number of contributing  
federal political committee.**C**

C00102152

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA11C.27715747**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTERN ALLIANCE BANCORPORATION POLITICAL ACTION COMMITTEE (**

Mailing Address 1 EAST WASHINGTON ST, STE 1400

City  
PHOENIXState  
AZZip Code  
85004-2559FEC ID number of contributing  
federal political committee.**C**

C00817585

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA11C.27744208**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZENECA INC. POLITICAL ACTION COMMITTEE (AZPAC)**

Mailing Address 1800 CONCORD PIKE, P.O. BOX 154

City  
WILMINGTONState  
DEZip Code  
19897-0001FEC ID number of contributing  
federal political committee.**C**

C00279455

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA11C.27763570**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

35000.00

**TOTAL** This Period (last page this line number only)..... ►

1932223.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5976 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMERICAN VICTORY FUND**Mailing Address 824 S MILLEDGE AVE  
SUITE 101City  
ATHENSState  
GAZip Code  
30605-1369FEC ID number of contributing  
federal political committee.**C**

C00758532

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11397.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA12.27744232**

Amount of Each Receipt this Period

11397.41

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCOY, BRANDON, R., ,**

Mailing Address 1989 NW KELLY LN

City  
JASPERState  
FLZip Code  
32052-6476FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 04 / 2024**Transaction ID : SA12.27748025**

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: AMERICAN  
VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ODOM, BLAKE, , ,**Mailing Address 3020 HARTLEY RD  
STE 300City  
JACKSONVILLEState  
FLZip Code  
32257-8207FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
APPLIED INSURANCE ADVISORSOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 04 / 2024**Transaction ID : SA12.27748026**

Amount of Each Receipt this Period

1700.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: AMERICAN  
VICTORY FUND**SUBTOTAL** of Receipts This Page (optional)..... ►

11397.41

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5977 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURGESS OWENS VICTORY COMMITTEE**

Mailing Address 824 SOUTH MILLEDGE AVENUE

City  
ATHENSState  
GAZip Code  
30605-1366FEC ID number of contributing  
federal political committee.**C** C00876201

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35236.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA12.27744257**

Amount of Each Receipt this Period

35236.02

☐ Memo Item

TRANSFER

SOME DONORS PREVIOUSLY DISCLOSED;  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BINDER, ANN, G., ,**

Mailing Address 1640 AMALFI DR.

City  
PACIFIC PALISADESState  
CAZip Code  
90272-2755FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 16 / 2024**Transaction ID : SA12.27748029**

Amount of Each Receipt this Period

1700.06

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: BURGESS OWENS  
VICTORY COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARTER, CHRISTOPHER, , ,**

Mailing Address 3881 QUARRY MOUNTAIN RD

City  
PARK CITYState  
UTZip Code  
84098-6617FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

28528.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 26 / 2024**Transaction ID : SA12.27748030**

Amount of Each Receipt this Period

15615.24

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: BURGESS OWENS  
VICTORY COMMITTEE**SUBTOTAL** of Receipts This Page (optional)..... ►

35236.02

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5978 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARTER, CHRISTOPHER, , ,**

Mailing Address 3881 QUARRY MOUNTAIN RD

City  
PARK CITYState  
UTZip Code  
84098-6617FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

28528.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2024

**Transaction ID : SA12.27748033**

Amount of Each Receipt this Period

10330.58

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: BURGESS OWENS  
VICTORY COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARTER, CHRISTOPHER, , ,**

Mailing Address 3881 QUARRY MOUNTAIN RD

City  
PARK CITYState  
UTZip Code  
84098-6617FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

28528.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2024

**Transaction ID : SA12.27748034**

Amount of Each Receipt this Period

2582.64

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: BURGESS OWENS  
VICTORY COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DE GROOTE, DOUG, , ,**

Mailing Address 3013 WILLOW LANE

City  
THOUSAND OAKSState  
CAZip Code  
91361-4918FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DE GROOTE FINANCIALOccupation (for Individual)  
FINANCIAL PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2024

**Transaction ID : SA12.27748028**

Amount of Each Receipt this Period

1700.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: BURGESS OWENS  
VICTORY COMMITTEE**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5979 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEVEY, ARTHUR, , ,**Mailing Address 786 CRANDON BOULEVARD  
903City  
KEY BISCAVNEState  
FLZip Code  
33149-2506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3174.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2024

Transaction ID : SA12.27748031

Amount of Each Receipt this Period

1800.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: BURGESS OWENS  
VICTORY COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEVEY, ARTHUR, , ,**Mailing Address 786 CRANDON BOULEVARD  
903City  
KEY BISCAVNEState  
FLZip Code  
33149-2506FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3174.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2024

Transaction ID : SA12.27748032

Amount of Each Receipt this Period

1000.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: BURGESS OWENS  
VICTORY COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLE COMBINED COMMITTEE**

Mailing Address 12176 CHANCERY STATION CIRCLE

City  
RESTONState  
VAZip Code  
20190-5803FEC ID number of contributing  
federal political committee.**C** C00438481

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

11570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025

Transaction ID : SA12.27744203

Amount of Each Receipt this Period

11570.00

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11570.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5980 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMEY, DEBORAH, , ,**

Mailing Address 10767 RIVERSCAPE RUN

City  
GREAT FALLSState  
VAZip Code  
22066-3333FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 12 / 2024

Transaction ID : SA12.27756310

Amount of Each Receipt this Period

1700.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: COLE COMBINED  
COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHEROKEE NATION**

Mailing Address PO BOX 948

City  
TAHLEQUAHState  
OKZip Code  
74465-0948FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

41300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2024

Transaction ID : SA12.27756311

Amount of Each Receipt this Period

11300.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: COLE COMBINED  
COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EMMER MAJORITY BUILDERS**

Mailing Address 824 S. MILLEDGE AVE. STE. 101

City  
ATHENSState  
GAZip Code  
30605-1369FEC ID number of contributing  
federal political committee.**C** C00859058

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

22103.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA12.27744198

Amount of Each Receipt this Period

22103.73

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

22103.73



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5981 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EVGI, SHLOMI, , ,**

Mailing Address 1210 STIRLING ROAD UNIT 10B

City  
DANIA BEACHState  
FLZip Code  
33004-3553FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VAPE DADDY LLCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2024

Transaction ID : SA12.27756314

Amount of Each Receipt this Period

- 18400.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; RETURN OF DISTRIBUTION -  
MEMO FOR VAPE DADDY LLC; JFC ATTRIB:  
EMMER MAJORITY BUILDER

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAKONISHOK, JOSEF, , MR.,**

Mailing Address 1853 N HOWE ST

City  
CHICAGOState  
ILZip Code  
60614-5125FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
LSV ASSET MANAGEMENTOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22067.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2024

Transaction ID : SA12.27756318

Amount of Each Receipt this Period

22067.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: EMMER MAJORITY  
BUILDERS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, ADAM, , ,**

Mailing Address 34 OWENOK PARK

City  
WESTPORTState  
CTZip Code  
06880-6833FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KKROccupation (for Individual)  
FINANCE/INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 05 / 2024

Transaction ID : SA12.27756319

Amount of Each Receipt this Period

25000.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: EMMER MAJORITY  
BUILDERS**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5982 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TANANBAUM, STEVEN, A., ,**

Mailing Address 102 CANTERBURY LANE

City  
PALM BEACHState  
FLZip Code  
33480-3601FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GOLDEN TREE ASSET MANAGEMENTOccupation (for Individual)  
CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 09 / 2024

Transaction ID : SA12.27756317

Amount of Each Receipt this Period

13700.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: EMMER MAJORITY BUILDERS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMA, CARL, , ,**

Mailing Address 159 E WALTON PL

City  
CHICAGOState  
ILZip Code  
60611-1971FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 08 / 2024

Transaction ID : SA12.27756316

Amount of Each Receipt this Period

16400.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: EMMER MAJORITY BUILDERS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAPE DADDY LLC**

Mailing Address 3389 SHERIDAN ST STE 196

City  
HOLLYWOODState  
FLZip Code  
33021-3606FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2024

Transaction ID : SA12.27756315

Amount of Each Receipt this Period

- 18400.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; RETURN OF DISTRIBUTION -  
SEE MEMO ITEM; JFC ATTRIB: EMMER MAJORITY BUILDERS

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5983 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROW THE MAJORITY**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314-5404FEC ID number of contributing  
federal political committee.**C** C00858373

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

849529.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA12.27763564**

Amount of Each Receipt this Period

816773.44

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADES, DANIEL, , ,**

Mailing Address 180 SOUTH ISLAND ROAD

City  
GOLDEN BEACHState  
FLZip Code  
33160-2207FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

KAWA CAPITAL MANAGEMENT INC.

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 31 / 2025**Transaction ID : SA12.27766833**

Amount of Each Receipt this Period

13000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BATMASIAN, JAMES, H., MR.,**

Mailing Address 215 N FEDERAL HWY STE 1

City  
BOCA RATONState  
FLZip Code  
33432-3928FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

SELF-EMPLOYED

REAL-ESTATE INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA12.27766845**

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

816773.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5984 OF 6441

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOLLINGER, DONALD BOYSIE, T., MR.,**

Mailing Address P.O. BOX 250  
PENTHOUSE B

City  
LOCKPORT

State  
LA

Zip Code  
70374-0250

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BOLLINGER SHIPYARDS, INC.

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

**02** / **04** / **2025**

**Transaction ID : SA12.27766843**

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOWDEN, J., MURRY, ,**

Mailing Address 1780 SOUTH POST OAK LANE

City  
HOUSTON

State  
TX

Zip Code  
77056-3748

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
THE HANOVER CO.

Occupation (for Individual)  
CHAIRMAN/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA12.27766849**

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRAVO, ORLANDO, , ,**

Mailing Address 5800 NORTH BAY ROAD

City  
MIAMI BEACH

State  
FL

Zip Code  
33140-2043

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

**01** / **31** / **2025**

**Transaction ID : SA12.27766844**

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5985 OF 6441

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, REGINALD, JAMES, MR.,**

Mailing Address 317 MANSION DRIVE

City  
ALEXANDRIA

State  
VA

Zip Code  
22302-2904

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
KIRKLAND & ELLIS

Occupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

**02** / **04** / **2025**

**Transaction ID : SA12.27766842**

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMERON, RONALD, M., MR.,**

Mailing Address P.O. BOX 21440

City  
LITTLE ROCK

State  
AR

Zip Code  
72221-1440

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
MOUNTAIRE CORPORATION

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA12.27766854**

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ECONOMOS, STANLEY, , ,**

Mailing Address 50 SOUTH POINTE DRIVE

City  
MIAMI BEACH

State  
FL

Zip Code  
33139-4767

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ECONOMOS PROPERTIES

Occupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

13000.00

Date of Receipt

**02** / **20** / **2025**

**Transaction ID : SA12.27766835**

Amount of Each Receipt this Period

13000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5986 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISCHER, DAVID, T., AMB., SR.**

Mailing Address 249 PIERCE STREET

City  
BIRMINGHAMState  
MIZip Code  
48009-6044FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

THE SUBURBAN COLLECTION HOLDINGS, LLC

Occupation (for Individual)

CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

38000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA12.27766838

Amount of Each Receipt this Period

38000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENNEBERRY, BRIAN, , MR.,**

Mailing Address 8605 WHITE POST COURT

City  
ROCKVILLEState  
MDZip Code  
20854-4270FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

KOCH INDUSTRIES

Occupation (for Individual)

GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA12.27766837

Amount of Each Receipt this Period

3000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANGONE, KEN, G., MR.,**Mailing Address 375 PARK AVENUE  
SUITE 2205City  
NEW YORKState  
NYZip Code  
10152-2201FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

INVEMED

Occupation (for Individual)

BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA12.27766852

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5987 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASTROIANNI, NICHOLAS, , ,**

Mailing Address 691 U.S. 1

City  
TEQUESTAState  
FLZip Code  
33469-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
US IMMIGRATION FUND LLCOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

Transaction ID : SA12.27766846

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCREA, MARSHALL, STOREY, , III**

Mailing Address P.O. BOX 592137

City  
SAN ANTONIOState  
TXZip Code  
78259-0156FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENERGY TRANSFER PARTNERSOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 22 / 2025

Transaction ID : SA12.27766841

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MODESETT, DAVID, , MR.,**

Mailing Address PO BOX 27357

City  
HOUSTONState  
TXZip Code  
77227-7357FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VEGA ENERGY HOLDINGSOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

13000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2025

Transaction ID : SA12.27766832

Amount of Each Receipt this Period

13000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5988 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NAU, JOHN, L., MR., III**Mailing Address 3690 INWOOD DRIVE  
SUITE 1250City  
HOUSTONState  
TXZip Code  
77019-3024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SILVER EAGLE DISTRIBUTORS, INC.Occupation (for Individual)  
PRESIDENT, C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

41300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2025

Transaction ID : SA12.27766839

Amount of Each Receipt this Period

41300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIEHAUS, ROBERT, H., MR.,**Mailing Address 770 PARK AVENUE  
#16D APARTMENT 16DCity  
NEW YORKState  
NYZip Code  
10021-4169FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GREENHILL COMPANYOccupation (for Individual)  
INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA12.27766856

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OBERNDORF, WILLIAM, E., MR.,**

Mailing Address 615 FRONT ST

City  
SAN FRANCISCOState  
CAZip Code  
94111-1913FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SPO PARTNERSOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2025

Transaction ID : SA12.27766847

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5989 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POHANKA, GEOFFREY, P., MR.,**

Mailing Address 2120 POLO POINTE DR.

City  
VIENNAState  
VAZip Code  
22181-2846FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
POHANKA HONDAOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA12.27766848

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PSAROS, MICHAEL, G., ,**Mailing Address 520 PARK AVE  
APT 27City  
NEW YORKState  
NYZip Code  
10065-8070FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KPS CAPITAL PARTNERSOccupation (for Individual)  
FUND MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

41300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 04 / 2025

Transaction ID : SA12.27766840

Amount of Each Receipt this Period

41300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANKAR, SHYAM, , ,**

Mailing Address 3511 SOUTH OGDEN STREET

City  
ENGLEWOODState  
COZip Code  
80113-3922FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 30 / 2025

Transaction ID : SA12.27766858

Amount of Each Receipt this Period

8000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5990 OF 6441

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHAR, DWIGHT, C., ,**

Mailing Address 460 WORTH AVENUE

City  
PALM BEACH

State  
FL

Zip Code  
33480-4520

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA12.27766850**

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHAR, MARTHA, , ,**

Mailing Address 460 WORTH AVE

City  
PALM BEACH

State  
FL

Zip Code  
33480-4520

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

**02** / **19** / **2025**

**Transaction ID : SA12.27766851**

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEPHENS, WARREN, A., MR.,**

Mailing Address 111 CENTER STREET  
P.O. BOX 5507

City  
LITTLE ROCK

State  
AR

Zip Code  
72201-4402

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

**02** / **03** / **2025**

**Transaction ID : SA12.27766853**

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5991 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THIEL, PETER, , ,**Mailing Address 3200 SUNSET BOULEVARD  
SUITE 1110City  
WEST HOLLYWOODState  
CAZip Code  
90069-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FOUNDERS FUNDOccupation (for Individual)  
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA12.27766855

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKER, TODD, A., MR.,**Mailing Address 7200 ELIZABETH DR.  
SUITE 400 WESTCity  
MC LEANState  
VAZip Code  
22101-2627FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ALTRIA CLIENT SERVICESOccupation (for Individual)  
SENIOR VICE PRESIDENT GOVT. AF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA12.27766834

Amount of Each Receipt this Period

13000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DELOITTE POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 365

City  
WASHINGTONState  
DCZip Code  
20044-0365FEC ID number of contributing  
federal political committee.**C** C00211318

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

Transaction ID : SA12.27766857

Amount of Each Receipt this Period

7500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5992 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIKE JOHNSON FOR LOUISIANA**Mailing Address C/O 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314-5404FEC ID number of contributing  
federal political committee.**C**

C00608695

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6651637.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2024

Transaction ID : SA12.27766831

Amount of Each Receipt this Period

400000.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: GROW THE  
MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND**

Mailing Address 11250 WAPLES MILL RD.

City  
FAIRFAXState  
VAZip Code  
22030-7550FEC ID number of contributing  
federal political committee.**C**

C00053553

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA12.27766836

Amount of Each Receipt this Period

15000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON LEADERSHIP FUND**Mailing Address 3337 N HULLEN ST  
STE 301City  
METAIRIEState  
LAZip Code  
70002-3455FEC ID number of contributing  
federal political committee.**C**

C00771246

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

309902.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA12.27763561

Amount of Each Receipt this Period

31579.08

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional)..... ►

31579.08

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5993 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAINES, DAVID, M., MR.,**

Mailing Address 425 ATHERTON DRIVE

City  
METAIRIEState  
LAZip Code  
70005-3809FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
REFUSEDOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2024

Transaction ID : SA12.27766826

Amount of Each Receipt this Period

12900.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: JOHNSON  
LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEAVENER, JAMES, W., MR.,**Mailing Address 3300 UNIVERSITY BLVD  
SUITE 218City  
WINTER PARKState  
FLZip Code  
32792-7435FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THE HEAVENER COMPANYOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 19 / 2024

Transaction ID : SA12.27766827

Amount of Each Receipt this Period

13400.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: JOHNSON  
LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PHELPS, JONATHAN, , MR.,**Mailing Address 140 E MORSE BLVD  
APT BCity  
WINTER PARKState  
FLZip Code  
32789-7414FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FULL SAIL UNIVERSITYOccupation (for Individual)  
FOUNDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

13400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 19 / 2024

Transaction ID : SA12.27766828

Amount of Each Receipt this Period

13400.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: JOHNSON  
LEADERSHIP FUND

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5994 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAETHER, PAUL, E., ,**Mailing Address 1350 AVENUE OF THE AMERICAS  
FL31City  
NEW YORKState  
NYZip Code  
10019-4702FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KKROccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

18400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	03	/	2024

Transaction ID : SA12.27766829

Amount of Each Receipt this Period

18400.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: JOHNSON  
LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHELDON, CHRISTOPHER, A., ,**Mailing Address 555 CALIFORNIA STREET  
50TH FLOORCity  
SAN FRANCISCOState  
CAZip Code  
94104-1788FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
K.K.R.Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

23400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2024

Transaction ID : SA12.27766830

Amount of Each Receipt this Period

23400.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: JOHNSON  
LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON LEADERSHIP FUND**Mailing Address 3337 N HULLEN ST  
STE 301City  
METAIRIEState  
LAZip Code  
70002-3455FEC ID number of contributing  
federal political committee.**C** C00771246

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

309902.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2025

Transaction ID : SA12.27763562

Amount of Each Receipt this Period

193323.55

☐ Memo Item

TRANSFER

DONORS PREVIOUSLY DISCLOSED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

193323.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5995 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON LEADERSHIP FUND**Mailing Address 3337 N HULLEN ST  
STE 301City  
METAIRIEState  
LAZip Code  
70002-3455FEC ID number of contributing  
federal political committee.**C**

C00771246

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

309902.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2025

**Transaction ID : SA12.27763563**

Amount of Each Receipt this Period

85000.00

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ASKEW, WHITAKER, , ,**

Mailing Address 7614 HOLIDAY DR.

City

ALEXANDRIA

State

VA

Zip Code

22308-1032

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

SUBJECT MATTER

Occupation (for Individual)

CONSULTANT

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

13000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2025

**Transaction ID : SA12.27766807**

Amount of Each Receipt this Period

13000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BECKER, BRENDA, L., MRS.,**

Mailing Address 8214 MACK STREET

City

ALEXANDRIA

State

VA

Zip Code

22308-1653

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

BOSTON SCIENTIFIC

Occupation (for Individual)

SENIOR V.P.

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	03	/	2025

**Transaction ID : SA12.27766814**

Amount of Each Receipt this Period

3000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

**SUBTOTAL** of Receipts This Page (optional).....▶

85000.00

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5996 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRAZEE, ELIZABETH, , MS.,**

Mailing Address 6313 EVERMAY DRIVE

City  
MCLEANState  
VAZip Code  
22101-2309FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
TWINLOGIC STRATEGIESOccupation (for Individual)  
CONSULTANT/ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY  
01 / 19 / 2025**Transaction ID : SA12.27766815**

Amount of Each Receipt this Period

3000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAYDEL, BEVERLY, , ,**

Mailing Address 3033 TORRANCE DR.

City  
BATON ROUGEState  
LAZip Code  
70809-1578FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SEQUITUR CONSULTINGOccupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4400.00

Date of Receipt

MM / DD / YYYY  
01 / 02 / 2025**Transaction ID : SA12.27766820**

Amount of Each Receipt this Period

4400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JENSEN CUNIFFE, AMY, L., MS.,**

Mailing Address 6950 DUNCRAIG CT

City  
MC LEANState  
VAZip Code  
22101-1568FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CARIS LIFE SCIENCESOccupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2025**Transaction ID : SA12.27766816**

Amount of Each Receipt this Period

3000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5997 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, TRAVIS, M., ,**

Mailing Address 5640 19TH ST N

City  
ARLINGTONState  
VAZip Code  
22205-3152FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ERIS GROUP, LLCOccupation (for Individual)  
GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2025**Transaction ID : SA12.27766818**

Amount of Each Receipt this Period

3000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCARTHY, FRANK, J., MR.,**

Mailing Address 2332 N EARLY ST

City  
ALEXANDRIAState  
VAZip Code  
22302-1705FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
CONSULTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY  
01 / 28 / 2025**Transaction ID : SA12.27766817**

Amount of Each Receipt this Period

3000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOSING, GREG, S., MR.,**

Mailing Address 308 SAWGRASS LANE

City  
BROUSSARDState  
LAZip Code  
70518-6149FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

13000.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA12.27766809**

Amount of Each Receipt this Period

13000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 5998 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROSENBLUM, ALAN, , ,**

Mailing Address 5804 AUGUSTA LN

City  
BETHESDAState  
MDZip Code  
20816-2316FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SENIOR CARE PHARMACY COALITIONOccupation (for Individual)  
PRESIDENT CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA12.27766808**

Amount of Each Receipt this Period

13000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHMIDT, MARK, D., ,**

Mailing Address 12 W MADISON

City  
PITTSBOROState  
NCZip Code  
27312-5014FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA12.27766823**

Amount of Each Receipt this Period

8000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMAS, NAJEEB, , ,**

Mailing Address 310 CITRUS ROAD

City  
RIVER RIDGEState  
LAZip Code  
70123-2043FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SOUTHERN BRAIN AND SPINEOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

38000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
01 / 29 / 2025**Transaction ID : SA12.27766819**

Amount of Each Receipt this Period

38000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5999 OF 6441

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. AT&T INC. EMPLOYEE FEDERAL PAC**

Mailing Address 208 S. AKARD STREET  
STE 1812

City  
DALLAS

State  
TX

Zip Code  
75202-4206

FEC ID number of contributing  
federal political committee.

**C**

C00109017

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**MM / DD / YYYY**  
02 / 14 / 2025

**Transaction ID : SA12.27766812**

Amount of Each Receipt this Period

15000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. FOX CORPORATION PAC**

Mailing Address 101 CONSTITUTION AVE NW  
SUITE 200 WEST

City  
WASHINGTON

State  
DC

Zip Code  
20001-2133

FEC ID number of contributing  
federal political committee.

**C**

C00693002

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**MM / DD / YYYY**  
02 / 04 / 2025

**Transaction ID : SA12.27766822**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. U.S. TRAVEL ASSOCIATION PAC**

Mailing Address 1100 NEW YORK AVE NW  
STE 450W

City  
WASHINGTON

State  
DC

Zip Code  
20005-3934

FEC ID number of contributing  
federal political committee.

**C**

C00457754

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**MM / DD / YYYY**  
01 / 31 / 2025

**Transaction ID : SA12.27766810**

Amount of Each Receipt this Period

15000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6000 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UNITEDHEALTH GROUP INC. PAC**Mailing Address 701 PENNSYLVANIA AVE., NW  
STE 600City  
WASHINGTONState  
DCZip Code  
20004-2692FEC ID number of contributing  
federal political committee.**C** C00274431

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA12.27766811**

Amount of Each Receipt this Period

15000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VALERO ENERGY CORPORATION PAC**

Mailing Address ONE VALERO WAY

City  
SAN ANTONIOState  
TXZip Code  
78249-1616FEC ID number of contributing  
federal political committee.**C** C00109546

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025**Transaction ID : SA12.27766813**

Amount of Each Receipt this Period

15000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHOLESALE & SPECIALTY INSURANCE ASSOCIATION PAC**Mailing Address 1500 K STREET NW  
SUITE 1100City  
WASHINGTONState  
DCZip Code  
20005-1233FEC ID number of contributing  
federal political committee.**C** C00417634

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2025**Transaction ID : SA12.27766821**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JOHNSON LEADERSHIP FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6001 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PFLUGER VICTORY FUND**

Mailing Address P.O. BOX 30844

City  
BETHESDAState  
MDZip Code  
20824-0844FEC ID number of contributing  
federal political committee.**C**

C00753913

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

72658.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA12.27744260**

Amount of Each Receipt this Period

72658.91

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANWAR, SYED, JAVAID, ,**Mailing Address 110 NORTH MARIENFIELD  
SUITE 101City  
MIDLANDState  
TXZip Code  
79701-4412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MIDLAND ENERGYOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA12.27752730**

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: PFLUGER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, CODY, C., ,**

Mailing Address 3882 BELLAIRE CIRCLE

City  
FORT WORTHState  
TXZip Code  
76109-2744FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DOUBLE EAGLE ENERGYOccupation (for Individual)  
CO-CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2025**Transaction ID : SA12.27752733**

Amount of Each Receipt this Period

33000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: PFLUGER VICTORY FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

72658.91

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6002 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRUMP, WILLIAM, , ,**

Mailing Address 4000 N BIG SPRING ST

City  
MIDLANDState  
TXZip Code  
79705-4629FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
BC OPERATINGOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33000.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA12.27752731**

Amount of Each Receipt this Period

33000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: PFLUGER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FOX, JOHN, M., MR.,**Mailing Address 3033 E 1ST AVE  
STR 505City  
DENVERState  
COZip Code  
80206-5611FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY  
02 / 17 / 2025**Transaction ID : SA12.27752732**

Amount of Each Receipt this Period

3000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: PFLUGER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUDY VICTORY FUND**

Mailing Address P.O. BOX 26141

City  
ALEXANDRIAState  
VAZip Code  
22313-6141FEC ID number of contributing  
federal political committee.**C** C00823997

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

108075.25

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2025**Transaction ID : SA12.27744219**

Amount of Each Receipt this Period

108075.25

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108075.25

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6003 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FENECH, WILLIAM, C., MR.,**Mailing Address 4101 GULF SHORE BLVD N  
PH 2City  
NAPLESState  
FLZip Code  
34103-2911FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GRAND DESIGNOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		21		2025

**Transaction ID : SA12.27756320**

Amount of Each Receipt this Period

44300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RUDY VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GARATONI, JUDITH, , ,**Mailing Address 4100 EDISON LAKES PKWY  
SUITE 260City  
MISHAWAKAState  
INZip Code  
46545-3470FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

**Transaction ID : SA12.27756323**

Amount of Each Receipt this Period

33000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RUDY VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GARATONI, LAWRENCE, H., MR.,**Mailing Address 4100 EDISON LAKES PKWY  
SUITE 260City  
MISHAWAKAState  
INZip Code  
46545-3470FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GARATONI FAMILY FOUNDATIONOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

**Transaction ID : SA12.27756324**

Amount of Each Receipt this Period

33000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RUDY VICTORY FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6004 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHWARTZ, JAMES, , ,**

Mailing Address 30751 MAGICIAN TERRACE

City  
DOWAGIACState  
MIZip Code  
49047-9479FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MARDOT LPOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
01 / 31 / 2025

Transaction ID : SA12.27756322

Amount of Each Receipt this Period

500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RUDY VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHWARTZ, JULIA, , ,**

Mailing Address 30751 MAGICIAN TERRACE

City  
DOWAGIACState  
MIZip Code  
49047-9479FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SCHWARTZ WIEKAMP FOUNDATIONOccupation (for Individual)  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
01 / 31 / 2025

Transaction ID : SA12.27756321

Amount of Each Receipt this Period

500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RUDY VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SALAZAR VICTORY COMMITTEE**

Mailing Address 3725 WEST FLAGLER STREET #281

City  
MIAMIState  
FLZip Code  
33134-1601FEC ID number of contributing  
federal political committee.**C** C00769711

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

48121.38

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025

Transaction ID : SA12.27744259

Amount of Each Receipt this Period

48121.38

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

48121.38



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6005 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARDONA, ALEJANDRO, , ,**

Mailing Address 900 SOUTH LAKE DRIVE

City  
HOLLYWOODState  
FLZip Code  
33019-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
AM EDUCATION - CREANDO RIQUEZAOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15395.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2024**Transaction ID : SA12.27756334**

Amount of Each Receipt this Period

15395.87

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: SALAZAR  
VICTORY COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EZRATTI, ITZHAK, , ,**Mailing Address 12717 W SUNRISE BLVD  
#415City  
SUNRISEState  
FLZip Code  
33323-0902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GL HOMESOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2024**Transaction ID : SA12.27756327**

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: SALAZAR  
VICTORY COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EZRATTI, MAXIE, , ,**Mailing Address 12717 W SUNRISE BLVD  
#415City  
SUNRISEState  
FLZip Code  
33323-0902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ME COUNSELINGOccupation (for Individual)  
COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2024**Transaction ID : SA12.27756328**

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: SALAZAR  
VICTORY COMMITTEE**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6006 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EZRATTI, MAYA, , ,**Mailing Address 12717 W SUNRISE BLVD  
#415City  
SUNRISEState  
FLZip Code  
33323-0902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GL SIGNATURE HOMESOccupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2024**Transaction ID : SA12.27756329**

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: SALAZAR  
VICTORY COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EZRATTI, MISHA, , ,**Mailing Address 12717 W SUNRISE BLVD  
#415City  
SUNRISEState  
FLZip Code  
33323-0902FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GL HOMESOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2024**Transaction ID : SA12.27756330**

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: SALAZAR  
VICTORY COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEARST, DEBORAH, , ,**

Mailing Address 214 EL BRILLO WAY

City  
PALM BEACHState  
FLZip Code  
33480-4728FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

13400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 20 / 2024**Transaction ID : SA12.27756333**

Amount of Each Receipt this Period

13400.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: SALAZAR  
VICTORY COMMITTEE**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6007 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAMAS, JOSE, A., ,**Mailing Address 1172 SOUTH DIXIE HIGHWAY  
NO 486City  
CORAL GABLESState  
FLZip Code  
33146-2918FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2030.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2024

**Transaction ID : SA12.27756335**

Amount of Each Receipt this Period

2030.58

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: SALAZAR  
VICTORY COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARQUEZ, CARLOS, M., ,**

Mailing Address 6495 BIRD RD

City  
MIAMIState  
FLZip Code  
33155-4827FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
L&R STRUCTURALOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2024

**Transaction ID : SA12.27756332**

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: SALAZAR  
VICTORY COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PENIN, CARLOS, A., ,**

Mailing Address 343 ALMERIA AVENUE

City  
CORAL GABLESState  
FLZip Code  
33134-5811FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
CAP GOVERNMENTOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2024

**Transaction ID : SA12.27756336**

Amount of Each Receipt this Period

700.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: SALAZAR  
VICTORY COMMITTEE**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6008 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VOCCOLA, FREDERICK, J., MR.,**Mailing Address 200 BISCAYNE BLVD  
APT 5304City  
MIAMIState  
FLZip Code  
33132-2219FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
KASEYAOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

29000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2024

**Transaction ID : SA12.27756331**

Amount of Each Receipt this Period

15000.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: SALAZAR  
VICTORY COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SERVANT LEADERSHIP FUND**

Mailing Address 824 S MILLEDGE AVE STE 101

City  
ATHENSState  
GAZip Code  
30605-1369FEC ID number of contributing  
federal political committee.**C** C00695163

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2025

**Transaction ID : SA12.27744220**

Amount of Each Receipt this Period

636.55

☐ Memo Item

TRANSFER

DONORS PREVIOUSLY DISCLOSED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TEAM MONICA VICTORY**Mailing Address 228 S WASHINGTON STREET  
SUITE 115City  
ALEXANDRIAState  
VAZip Code  
22314-5404FEC ID number of contributing  
federal political committee.**C** C00811307

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

565.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2025

**Transaction ID : SA12.27715738**

Amount of Each Receipt this Period

565.04

☐ Memo Item

TRANSFER

DONORS PREVIOUSLY DISCLOSED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1201.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6009 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THE BERGMAN VICTORY COMMITTEE**Mailing Address 824 S. MILLEDGE AVE  
STE 101City  
ATHENSState  
GAZip Code  
30605-1369FEC ID number of contributing  
federal political committee.**C** C00696088

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5605.72

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA12.27744233**

Amount of Each Receipt this Period

5605.72

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOETZ, JAMES, S., ,**

Mailing Address PO BOX 298

City

RAPID CITY

State

MI

Zip Code

49676-0298

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2024**Transaction ID : SA12.27748027**

Amount of Each Receipt this Period

6200.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; JFC ATTRIB: THE BERGMAN  
VICTORY COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

5605.72

**TOTAL** This Period (last page this line number only)..... ►

1442646.08

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6010 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. R&R REALTY GROUP**Mailing Address 1080 JORDAN CREEK PARKWAY  
STE 200NCity  
WEST DES MOINESState  
IAZip Code  
50266FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA15-0.252099

Amount of Each Receipt this Period

3200.00

☐ Memo Item

HQ ACCT-RENT-REFUND-SEE PMT 10/24/2024

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3200.00

3200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6011 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURGESS OWENS VICTORY COMMITTEE**

Mailing Address 824 SOUTH MILLEDGE AVENUE

City  
ATHENSState  
GAZip Code  
30605-1366FEC ID number of contributing  
federal political committee.**C**

C00876201

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Aggregate Year-to-Date ▼

16944.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025**Transaction ID : SA17.27744258**

Amount of Each Receipt this Period

16944.05

☐ Memo Item

TRANSFER

HEADQUARTERS ACCOUNT; SOME DONORS  
PREVIOUSLY DISCLOSED; TRANSFER OF JOINT  
FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STAHL, LEWIS, A., MR.,**Mailing Address 161 WEST 61ST STREET  
11TH FLOORCity  
NEW YORKState  
NYZip Code  
10023-7400FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NEXTGEN MANAGEMENT LLCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Aggregate Year-to-Date ▼

77454.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 21 / 2024**Transaction ID : SA17.27748035**

Amount of Each Receipt this Period

16700.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; HEADQUARTERS ACCOUNT;  
JFC ATTRIB: BURGESS OWENS VICTORY  
COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLE COMBINED COMMITTEE**

Mailing Address 12176 CHANCERY STATION CIRCLE

City  
RESTONState  
VAZip Code  
20190-5803FEC ID number of contributing  
federal political committee.**C**

C00438481

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify)☐ General

Aggregate Year-to-Date ▼

24475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA17.27752736**

Amount of Each Receipt this Period

24475.00

☐ Memo Item

TRANSFER

HEADQUARTERS ACCOUNT; TRANSFER OF JOINT  
FUNDRAISING PROCEEDS**SUBTOTAL** of Receipts This Page (optional)..... ►

41419.05

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6012 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHEROKEE NATION**

Mailing Address PO BOX 948

City  
TAHLEQUAHState  
OKZip Code  
74465-0948FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

27500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2024**Transaction ID : SA17.27756312**

Amount of Each Receipt this Period

27500.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; HEADQUARTERS ACCOUNT;  
JFC ATTRIB: COLE COMBINED COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLE COMBINED COMMITTEE**

Mailing Address 12176 CHANCERY STATION CIRCLE

City  
RESTONState  
VAZip Code  
20190-5803FEC ID number of contributing  
federal political committee.**C** C00438481

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

24475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2025**Transaction ID : SA17.27752737**

Amount of Each Receipt this Period

24475.00

☐ Memo Item

TRANSFER

LEGAL PROCEEDINGS ACCOUNT; TRANSFER OF  
JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHEROKEE NATION**

Mailing Address PO BOX 948

City  
TAHLEQUAHState  
OKZip Code  
74465-0948FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

27500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2024**Transaction ID : SA17.27756313**

Amount of Each Receipt this Period

27500.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; LEGAL PROCEEDINGS  
ACCOUNT; JFC ATTRIB: COLE COMBINED  
COMMITTEE**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

24475.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6013 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMMER MAJORITY BUILDERS**

Mailing Address 824 S. MILLEDGE AVE. STE. 101

City  
ATHENSState  
GAZip Code  
30605-1369FEC ID number of contributing  
federal political committee.**C** C00859058

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

32784.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA17.27744199**

Amount of Each Receipt this Period

32784.71

☐ Memo Item

TRANSFER

HEADQUARTERS ACCOUNT; DONORS  
PREVIOUSLY DISCLOSED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EMMER MAJORITY BUILDERS**

Mailing Address 824 S. MILLEDGE AVE. STE. 101

City  
ATHENSState  
GAZip Code  
30605-1369FEC ID number of contributing  
federal political committee.**C** C00859058

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11406.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA17.27744200**

Amount of Each Receipt this Period

11406.98

☐ Memo Item

TRANSFER

LEGAL PROCEEDINGS ACCOUNT; DONORS  
PREVIOUSLY DISCLOSED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROW THE MAJORITY**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314-5404FEC ID number of contributing  
federal political committee.**C** C00858373

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

489509.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA17.27763565**

Amount of Each Receipt this Period

459054.98

☐ Memo Item

TRANSFER

HEADQUARTERS ACCOUNT; TRANSFER OF JOINT  
FUNDRAISING PROCEEDS**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

503246.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6014 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMERON, RONALD, M., MR.,**

Mailing Address P.O. BOX 21440

City  
LITTLE ROCKState  
ARZip Code  
72221-1440FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MOUNTAIRE CORPORATIONOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

132900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

**Transaction ID : SA17.27766864**

Amount of Each Receipt this Period

132900.00

☒ Memo Item

TRANSFER

HEADQUARTERS ACCOUNT; JFC ATTRIB: GROW  
THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FOSTER, PAUL, L., MR.,**Mailing Address 123 W MILLS AVE  
STE 600City  
EL PASOState  
TXZip Code  
79901-1577FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FRANKLIN MOUNTAIN MANAGEMENTOccupation (for Individual)  
CHAIRMAN AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2024

**Transaction ID : SA17.27766859**

Amount of Each Receipt this Period

- 123600.00

☒ Memo Item

TRANSFER

2024 AGGREGATE; HEADQUARTERS ACCOUNT;  
JFC ATTRIB: GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANGONE, KEN, G., MR.,**Mailing Address 375 PARK AVENUE  
SUITE 2205City  
NEW YORKState  
NYZip Code  
10152-2201FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INVEMEDOccupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

132900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

**Transaction ID : SA17.27766862**

Amount of Each Receipt this Period

132900.00

☒ Memo Item

TRANSFER

HEADQUARTERS ACCOUNT; JFC ATTRIB: GROW  
THE MAJORITY**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6015 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NIEHAUS, ROBERT, H., MR.,**Mailing Address 770 PARK AVENUE  
#16D APARTMENT 16DCity  
NEW YORKState  
NYZip Code  
10021-4169FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GREENHILL COMPANYOccupation (for Individual)  
INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

26200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025

Transaction ID : SA17.27766866

Amount of Each Receipt this Period

26200.00

☒ Memo Item

TRANSFER

HEADQUARTERS ACCOUNT; JFC ATTRIB: GROW  
THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEPHENS, WARREN, A., MR.,**Mailing Address 111 CENTER STREET  
P.O. BOX 5507City  
LITTLE ROCKState  
ARZip Code  
72201-4402FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

132900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 03 / 2025

Transaction ID : SA17.27766863

Amount of Each Receipt this Period

132900.00

☒ Memo Item

TRANSFER

HEADQUARTERS ACCOUNT; JFC ATTRIB: GROW  
THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THIEL, PETER, , ,**Mailing Address 3200 SUNSET BOULEVARD  
SUITE 1110City  
WEST HOLLYWOODState  
CAZip Code  
90069-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FOUNDERS FUNDOccupation (for Individual)  
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

132900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : SA17.27766865

Amount of Each Receipt this Period

132900.00

☒ Memo Item

TRANSFER

HEADQUARTERS ACCOUNT; JFC ATTRIB: GROW  
THE MAJORITY

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6016 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND**

Mailing Address 11250 WAPLES MILL RD.

City  
FAIRFAXState  
VAZip Code  
22030-7550FEC ID number of contributing  
federal political committee.

C C00053553

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA17.27766861

Amount of Each Receipt this Period

15000.00

☒ Memo Item

TRANSFER

HEADQUARTERS ACCOUNT; JFC ATTRIB: GROW  
THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THE HOME DEPOT, INC. POLITICAL ACTION COMMITTEE**Mailing Address 1155 F STREET NW  
SUITE 400City  
WASHINGTONState  
DCZip Code  
20004-1346FEC ID number of contributing  
federal political committee.

C C00284885

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025

Transaction ID : SA17.27766860

Amount of Each Receipt this Period

45000.00

☒ Memo Item

TRANSFER

HEADQUARTERS ACCOUNT; JFC ATTRIB: GROW  
THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROW THE MAJORITY**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314-5404FEC ID number of contributing  
federal political committee.

C C00858373

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365056.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA17.27763567

Amount of Each Receipt this Period

355937.88

☐ Memo Item

TRANSFER

LEGAL PROCEEDINGS ACCOUNT; TRANSFER OF  
JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

355937.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6017 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMERON, RONALD, M., MR.,**

Mailing Address P.O. BOX 21440

City  
LITTLE ROCKState  
ARZip Code  
72221-1440FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MOUNTAIRE CORPORATIONOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

132900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2025

**Transaction ID : SA17.27766870**

Amount of Each Receipt this Period

132900.00

☒ Memo Item

TRANSFER

LEGAL PROCEEDINGS ACCOUNT; JFC ATTRIB:  
GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEPHENS, WARREN, A., MR.,**Mailing Address 111 CENTER STREET  
P.O. BOX 5507City  
LITTLE ROCKState  
ARZip Code  
72201-4402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

132900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2025

**Transaction ID : SA17.27766868**

Amount of Each Receipt this Period

21000.00

☒ Memo Item

TRANSFER

LEGAL PROCEEDINGS ACCOUNT; JFC ATTRIB:  
GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEPHENS, WARREN, A., MR.,**Mailing Address 111 CENTER STREET  
P.O. BOX 5507City  
LITTLE ROCKState  
ARZip Code  
72201-4402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

132900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	03	/	2025

**Transaction ID : SA17.27766869**

Amount of Each Receipt this Period

111900.00

☒ Memo Item

TRANSFER

LEGAL PROCEEDINGS ACCOUNT; JFC ATTRIB:  
GROW THE MAJORITY**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6018 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THIEL, PETER, , ,**Mailing Address 3200 SUNSET BOULEVARD  
SUITE 1110City  
WEST HOLLYWOODState  
CAZip Code  
90069-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FOUNDERS FUNDOccupation (for Individual)  
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

132900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2025

**Transaction ID : SA17.27766871**

Amount of Each Receipt this Period

132900.00

☒ Memo Item

TRANSFER

LEGAL PROCEEDINGS ACCOUNT; JFC ATTRIB:  
GROW THE MAJORITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON LEADERSHIP FUND**Mailing Address 3337 N HULLEN ST  
STE 301City  
METAIRIEState  
LAZip Code  
70002-3455FEC ID number of contributing  
federal political committee.**C** C00771246

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2025

**Transaction ID : SA17.27763566**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

TRANSFER

LEGAL PROCEEDINGS ACCOUNT; TRANSFER OF  
JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AT&T INC. EMPLOYEE FEDERAL PAC**Mailing Address 208 S. AKARD STREET  
STE 1812City  
DALLASState  
TXZip Code  
75202-4206FEC ID number of contributing  
federal political committee.**C** C00109017

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	14	/	2025

**Transaction ID : SA17.27766824**

Amount of Each Receipt this Period

20000.00

☒ Memo Item

TRANSFER

LEGAL PROCEEDINGS ACCOUNT; JFC ATTRIB:  
JOHNSON LEADERSHIP FUND**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

25000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6019 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VALERO ENERGY CORPORATION PAC**

Mailing Address ONE VALERO WAY

City  
SAN ANTONIOState  
TXZip Code  
78249-1616FEC ID number of contributing  
federal political committee.**C**

C00109546

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

40000.00

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2025**Transaction ID : SA17.27766825**

Amount of Each Receipt this Period

40000.00

☒ Memo Item

TRANSFER

LEGAL PROCEEDINGS ACCOUNT; JFC ATTRIB:  
JOHNSON LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PFLUGER VICTORY FUND**

Mailing Address P.O. BOX 30844

City  
BETHESDAState  
MDZip Code  
20824-0844FEC ID number of contributing  
federal political committee.**C**

C00753913

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

94121.72

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2025**Transaction ID : SA17.27744261**

Amount of Each Receipt this Period

94121.72

☐ Memo Item

TRANSFER

LEGAL PROCEEDINGS ACCOUNT; TRANSFER OF  
JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANWAR, SYED, JAVAID, ,**Mailing Address 110 NORTH MARIENFIELD  
SUITE 101City  
MIDLANDState  
TXZip Code  
79701-4412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MIDLAND ENERGYOccupation (for Individual)  
CEO

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

132900.00

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2025**Transaction ID : SA17.27752734**

Amount of Each Receipt this Period

132900.00

☒ Memo Item

TRANSFER

LEGAL PROCEEDINGS ACCOUNT; JFC ATTRIB:  
PFLUGER VICTORY FUND**SUBTOTAL** of Receipts This Page (optional)..... ►

94121.72

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6020 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PFLUGER VICTORY FUND**

Mailing Address P.O. BOX 30844

City  
BETHESDAState  
MDZip Code  
20824-0844FEC ID number of contributing  
federal political committee.**C** C00753913

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

115120.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA17.27744262**

Amount of Each Receipt this Period

115120.16

☐ Memo Item

TRANSFER

HEADQUARTERS ACCOUNT; TRANSFER OF JOINT  
FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANWAR, SYED, JAVAID, ,**Mailing Address 110 NORTH MARIENFIELD  
SUITE 101City  
MIDLANDState  
TXZip Code  
79701-4412FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MIDLAND ENERGYOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

132900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA17.27752735**

Amount of Each Receipt this Period

132900.00

☒ Memo Item

TRANSFER

HEADQUARTERS ACCOUNT; JFC ATTRIB:  
PFLUGER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUDY VICTORY FUND**

Mailing Address P.O. BOX 26141

City  
ALEXANDRIAState  
VAZip Code  
22313-6141FEC ID number of contributing  
federal political committee.**C** C00823997

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

129049.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2025**Transaction ID : SA17.27748078**

Amount of Each Receipt this Period

129049.43

☐ Memo Item

TRANSFER

HEADQUARTERS ACCOUNT; TRANSFER OF JOINT  
FUNDRAISING PROCEEDS**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

244169.59



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6021 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FENECH, WILLIAM, C., MR.,**Mailing Address 4101 GULF SHORE BLVD N  
PH 2City  
NAPLESState  
FLZip Code  
34103-2911FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GRAND DESIGNOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

132900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2025

**Transaction ID : SA17.27756325**

Amount of Each Receipt this Period

132900.00

☒ Memo Item

TRANSFER

HEADQUARTERS ACCOUNT; JFC ATTRIB: RUDY  
VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUDY VICTORY FUND**

Mailing Address P.O. BOX 26141

City

ALEXANDRIA

State

VA

Zip Code

22313-6141

FEC ID number of contributing  
federal political committee.**C** C00823997

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5631.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2025

**Transaction ID : SA17.27748079**

Amount of Each Receipt this Period

5631.95

☐ Memo Item

TRANSFER

LEGAL PROCEEDINGS ACCOUNT; TRANSFER OF  
JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FENECH, WILLIAM, C., MR.,**Mailing Address 4101 GULF SHORE BLVD N  
PH 2

City

NAPLES

State

FL

Zip Code

34103-2911

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GRAND DESIGNOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2025

**Transaction ID : SA17.27756326**

Amount of Each Receipt this Period

5800.00

☒ Memo Item

TRANSFER

LEGAL PROCEEDINGS ACCOUNT; JFC ATTRIB:  
RUDY VICTORY FUND**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5631.95

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6022 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CASCARILLA, CHARLES, G., ,**

Mailing Address 2821 SOUTH BAYSHORE DRIVE

City  
MIAMIState  
FLZip Code  
33133-6019FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PAXOSOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

105700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA17.27744266**

Amount of Each Receipt this Period

105700.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SINGER, PAUL, ELLIOT, MR.,**Mailing Address 40 W 57TH ST, 30TH FLOOR  
BOX 150City  
NEW YORKState  
NYZip Code  
10019-4038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ELLIOTT MANAGEMENT CORPORATIONOccupation (for Individual)  
FOUNDER & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

132900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA17.27715752**

Amount of Each Receipt this Period

132900.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SINGER, PAUL, ELLIOT, MR.,**Mailing Address 40 W 57TH ST, 30TH FLOOR  
BOX 150City  
NEW YORKState  
NYZip Code  
10019-4038FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ELLIOTT MANAGEMENT CORPORATIONOccupation (for Individual)  
FOUNDER & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

111900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA17.27715753**

Amount of Each Receipt this Period

111900.00

☐ Memo Item

CONTRIBUTION

LEGAL PROCEEDINGS ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

350500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6023 OF 6441

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVE

City  
MCLEAN

State  
VA

Zip Code  
22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45156.64

Date of Receipt

02 / 28 / 2025

**Transaction ID : SA17-0.212025**

Amount of Each Receipt this Period

6968.97

☐ Memo Item

HQ ACCT - INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVE

City  
MCLEAN

State  
VA

Zip Code  
22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45156.64

Date of Receipt

02 / 28 / 2025

**Transaction ID : SA17-0.242025**

Amount of Each Receipt this Period

5.05

☐ Memo Item

HQ ACCT - INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVE

City  
MCLEAN

State  
VA

Zip Code  
22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

45156.64

Date of Receipt

02 / 28 / 2025

**Transaction ID : SA17-0.252025**

Amount of Each Receipt this Period

363.60

☐ Memo Item

INTEREST

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7337.62

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6024 OF 6441

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVE

City  
MCLEAN

State  
VA

Zip Code  
22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45156.64

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA17-0.262025**

Amount of Each Receipt this Period

5.05

☐ Memo Item

INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVE

City  
MCLEAN

State  
VA

Zip Code  
22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45156.64

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA17-0.272025**

Amount of Each Receipt this Period

14851.22

☐ Memo Item

RECOUNT-INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVE

City  
MCLEAN

State  
VA

Zip Code  
22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

45156.64

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2025

**Transaction ID : SA17-0.282025**

Amount of Each Receipt this Period

5.05

☐ Memo Item

RECOUNT-INTEREST

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

14861.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6025 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FEDERATED INDIANS OF GRATON RANCHERIA**Mailing Address 6400 REDWOOD DRIVE  
SUITE 300City  
ROHNERT PARKState  
CAZip Code  
94928-2341FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2025**Transaction ID : SA17.27715760**

Amount of Each Receipt this Period

55700.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALLIED PILOTS ASSOCIATION PAC**Mailing Address 14600 TRINITY BLVD  
SUITE 500City  
FORT WORTHState  
TXZip Code  
76155-2559FEC ID number of contributing  
federal political committee.**C** C00267849

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA17.27744245**

Amount of Each Receipt this Period

45000.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALLIED PILOTS ASSOCIATION PAC**Mailing Address 14600 TRINITY BLVD  
SUITE 500City  
FORT WORTHState  
TXZip Code  
76155-2559FEC ID number of contributing  
federal political committee.**C** C00267849

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA17.27744247**

Amount of Each Receipt this Period

45000.00

☐ Memo Item

CONTRIBUTION

LEGAL PROCEEDINGS ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6026 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AMERICAN BANKERS ASSOCIATION PAC**Mailing Address 1333 NEW HAMPSHIRE AVE NW  
STE 700City  
WASHINGTONState  
DCZip Code  
20036-1532FEC ID number of contributing  
federal political committee.**C** C00004275

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA17.27744229**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)**Mailing Address 1400 L ST NW  
STE 400City  
WASHINGTONState  
DCZip Code  
20005-3592FEC ID number of contributing  
federal political committee.**C** C00010868

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2025**Transaction ID : SA17.27744202**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CREDIT UNION NATIONAL ASSOCIATION PAC**Mailing Address 99 M ST SE  
STE 300City  
WASHINGTONState  
DCZip Code  
20003-3957FEC ID number of contributing  
federal political committee.**C** C00007880

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA17.27744244**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6027 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DELOITTE POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 365

City  
WASHINGTONState  
DCZip Code  
20044-0365FEC ID number of contributing  
federal political committee.**C**

C00211318

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA17.27744228**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DELOITTE POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 365

City  
WASHINGTONState  
DCZip Code  
20044-0365FEC ID number of contributing  
federal political committee.**C**

C00211318

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA17.27794560**

Amount of Each Receipt this Period

7500.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRESENIUS MEDICAL CARE NORTH AMERICA PAC**Mailing Address 801 PENNSYLVANIA AVENUE NW  
SUITE 255City  
WASHINGTONState  
DCZip Code  
20004-3637FEC ID number of contributing  
federal political committee.**C**

C00401299

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA17.27763583**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

37500.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6028 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PNC FINANCIAL SERVICES PAC**

Mailing Address 249 FIFTH AVENUE

City  
PITTSBURGHState  
PAZip Code  
15222-2707FEC ID number of contributing  
federal political committee.**C**

C00035519

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

40000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2025**Transaction ID : SA17.27715748**

Amount of Each Receipt this Period

40000.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOUTHWEST AIRLINES PILOTS' ASSOCIATION PAC**

Mailing Address 1450 EMPIRE CENTRAL DR. STE. 737

City  
DALLASState  
TXZip Code  
75247-4081FEC ID number of contributing  
federal political committee.**C**

C00360669

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2025**Transaction ID : SA17.27744246**

Amount of Each Receipt this Period

45000.00

☐ Memo Item

CONTRIBUTION

LEGAL PROCEEDINGS ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

9415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025**Transaction ID : SA17.27654565**

Amount of Each Receipt this Period

390.00

☒ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT; SEE ATTRIBUTION  
BELOW FOR ALL DONORS ABOVE ITEMIZATION  
THRESHOLD**SUBTOTAL** of Receipts This Page (optional)..... ►

85000.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6029 OF 6441

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURL, RICHARD, L., MR.,**Mailing Address 200 WATERS DR.  
APT A304City  
SOUTHERN PINESState  
NCZip Code  
28387-2249FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2025

Transaction ID : SA17.27654570

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4503.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA17.27664584

Amount of Each Receipt this Period

637.00

☒ Memo Item

CONTRIBUTION

LEGAL PROCEEDINGS ACCOUNT; SEE  
ATTRIBUTION BELOW FOR ALL DONORS ABOVE  
ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKS, MARTHA, , MS.,**

Mailing Address 2815 SIMONDALE DR.

City  
FORT WORTHState  
TXZip Code  
76109-1255FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2025

Transaction ID : SA17.27664585

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

LEGAL PROCEEDINGS ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6030 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Aggregate Year-to-Date ▼

9415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA17.27702474**

Amount of Each Receipt this Period

170.00

☒ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT; SEE ATTRIBUTION  
BELOW FOR ALL DONORS ABOVE ITEMIZATION  
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOHMAN, CAROLYN, , ,**

Mailing Address 3229 WALNUT CREEK CT

City  
BRYANState  
TXZip Code  
77807-4852FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2025**Transaction ID : SA17.27702476**

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify)☐ General

Aggregate Year-to-Date ▼

9415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025**Transaction ID : SA17.27716130**

Amount of Each Receipt this Period

702.00

☒ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT; SEE ATTRIBUTION  
BELOW FOR ALL DONORS ABOVE ITEMIZATION  
THRESHOLD**SUBTOTAL** of Receipts This Page (optional)..... ►

50.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6031 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOHMAN, CAROLYN, , ,**

Mailing Address 3229 WALNUT CREEK CT

City  
BRYANState  
TXZip Code  
77807-4852FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA17.27716138**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TIFFANY, LYLE, B., ,**

Mailing Address 2267 PONTIAC TRL

City

ANN ARBOR

State

MI

Zip Code

48105-1224

FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2025**Transaction ID : SA17.27716139**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

9415.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2025**Transaction ID : SA17.27727642**

Amount of Each Receipt this Period

910.00

☒ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT; SEE ATTRIBUTION  
BELOW FOR ALL DONORS ABOVE ITEMIZATION  
THRESHOLD**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6032 OF 6441  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GATES, BRUCE, A., MR.,**

Mailing Address P.O. BOX 143

City  
CLYDE PARKState  
MTZip Code  
59018-0143FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ALTRIAOccupation (for Individual)  
SR. V.P. GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2025**Transaction ID : SA17.27791899**

Amount of Each Receipt this Period

700.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA17.27731485**

Amount of Each Receipt this Period

1076.00

☒ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT; SEE ATTRIBUTION  
BELOW FOR ALL DONORS ABOVE ITEMIZATION  
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BANCROFT, HUGH, , MR., III**

Mailing Address P.O. BOX 25

City  
RANCHO SANTA FEState  
CAZip Code  
92067-0025FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2025**Transaction ID : SA17.27731495**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

HEADQUARTERS ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1200.00

1982400.80

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6033 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ALEXANDER, NATALIE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70432

Amount of Each Disbursement this Period

2364.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BAUGHMAN, ANDREW, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70432

Amount of Each Disbursement this Period

2036.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BELL, JORDAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67531

Amount of Each Disbursement this Period

2507.92

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

6908.46

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6034 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BELL, JORDAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.70432**

Amount of Each Disbursement this Period

2507.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BOVA, NATHAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.67538**

Amount of Each Disbursement this Period

876.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BOVA, NATHAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.70432**

Amount of Each Disbursement this Period

1651.79

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5036.59

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6035 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BOWER, TAYLOR, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.6753

Amount of Each Disbursement this Period

5240.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BOWER, TAYLOR, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.70433

Amount of Each Disbursement this Period

2847.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BOYER, JOSHUA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.6753

Amount of Each Disbursement this Period

4155.02

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

12243.15

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6036 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BOYER, JOSHUA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.7043**

Amount of Each Disbursement this Period

4155.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BRUNNER, MARKUS, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.67538**

Amount of Each Disbursement this Period

2042.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BRUNNER, MARKUS, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.7043**

Amount of Each Disbursement this Period

2653.22

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

8851.05

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6037 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BULOT, MADILYNN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.6753

Amount of Each Disbursement this Period

1156.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BULOT, MADILYNN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70433

Amount of Each Disbursement this Period

1156.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BUTLER, HANNA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.6753

Amount of Each Disbursement this Period

2171.79

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4484.23

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6038 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BUTLER, HANNA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

2171.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CALDERON, BRYAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67539

Amount of Each Disbursement this Period

2277.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CALDERON, BRYAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

2277.16

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6726.11

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6039 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CAREY, CHRISTOPHER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.6753

Amount of Each Disbursement this Period

867.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAREY, CHRISTOPHER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70433

Amount of Each Disbursement this Period

867.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CLARK, ERIN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.6753

Amount of Each Disbursement this Period

6107.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7842.71

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6040 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CLARK, ERIN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70433

Amount of Each Disbursement this Period

6107.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. COKER, ANDREA, , ,**

Mailing Address 9211 BRIARHURST DRIVE

City  
DALLASState  
TXZip Code  
75243

Purpose of Disbursement

FINANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.65547

Amount of Each Disbursement this Period

1120.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CONSTANGY, BILLY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67531

Amount of Each Disbursement this Period

5895.64

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

13122.69

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6041 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. **CONSTANGY, BILLY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

5895.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. **COVINGTON, COLEMAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67539

Amount of Each Disbursement this Period

4430.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. **COVINGTON, COLEMAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

4430.44

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

14756.52

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6042 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CUETO, PABLO, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.6753

Amount of Each Disbursement this Period

4255.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CUETO, PABLO, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.70434

Amount of Each Disbursement this Period

4255.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVIDSON, JILLIAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.6753

Amount of Each Disbursement this Period

5052.63

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

13563.29

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6043 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. DAVIDSON, JILLIAN, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70434

Amount of Each Disbursement this Period

5052.63

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DAVIS, CHASE, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67539

Amount of Each Disbursement this Period

2567.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DAVIS, CHASE, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

2567.38

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

10187.39

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6044 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DOLLAR, RYAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.6754C

Amount of Each Disbursement this Period

6513.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DOLLAR, RYAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.70434

Amount of Each Disbursement this Period

6513.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DOOLEY, LAUREN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.6754I

Amount of Each Disbursement this Period

2804.19

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15830.99



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6045 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. DOOLEY, LAUREN, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70434

Amount of Each Disbursement this Period

2804.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DOSS, EVELYN, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67540

Amount of Each Disbursement this Period

1136.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DOSS, EVELYN, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

1136.14

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

5076.47

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6046 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DOYLE, ASHLEY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.6754

Amount of Each Disbursement this Period

1137.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DOYLE, ASHLEY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.70434

Amount of Each Disbursement this Period

1137.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EAGER, LEONARD, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.6754

Amount of Each Disbursement this Period

3983.41

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

6258.15

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6047 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. EAGER, LEONARD, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70434

Amount of Each Disbursement this Period

3983.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FETZER, KELSEY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67540

Amount of Each Disbursement this Period

3586.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FETZER, KELSEY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

3586.31

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

11156.03

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6048 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. FOSTER, ASHLEY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.6754

Amount of Each Disbursement this Period

2220.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FOSTER, ASHLEY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70435

Amount of Each Disbursement this Period

2220.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FOSTER, TRISTON, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.6754

Amount of Each Disbursement this Period

3239.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7680.14

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6049 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. FOSTER, TRISTON, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70435

Amount of Each Disbursement this Period

5316.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FOTI, TYLER, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	4			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67366

Amount of Each Disbursement this Period

1620.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GALLAGHER, TIMOTHY, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67541

Amount of Each Disbursement this Period

2403.95

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

9341.03

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6050 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GALLAGHER, TIMOTHY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

2403.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GIBBON, DAVID, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.67540

Amount of Each Disbursement this Period

4393.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GIBBON, DAVID, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

4393.86

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

11191.67

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6051 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GORALNICK, GABRIEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.67541

Amount of Each Disbursement this Period

1219.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GORALNICK, GABRIEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.70435

Amount of Each Disbursement this Period

1300.53

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GOZALO, SOFIA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.67541

Amount of Each Disbursement this Period

1994.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4514.45

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6052 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GOZALO, SOFIA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70435

Amount of Each Disbursement this Period

1994.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GREENE, EMILY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67541

Amount of Each Disbursement this Period

1154.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GREENE, EMILY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70435

Amount of Each Disbursement this Period

1154.57

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4303.58

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6053 OF 6441

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. GRIFFIN, GEORGE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.67541**

Amount of Each Disbursement this Period

5197.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GRIFFIN, GEORGE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.70436**

Amount of Each Disbursement this Period

5197.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GUELI, THOMAS, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.67541**

Amount of Each Disbursement this Period

1862.39

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12258.17

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6054 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GUELI, THOMAS, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.70436

Amount of Each Disbursement this Period

1862.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HALLER, TAYLOR, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.67541

Amount of Each Disbursement this Period

2723.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HALLER, TAYLOR, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.70436

Amount of Each Disbursement this Period

2723.76

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7309.91

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6055 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. HARDIN, NATALYA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67541

Amount of Each Disbursement this Period

1904.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HARDIN, NATALYA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70436

Amount of Each Disbursement this Period

1904.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRISON, JESSICA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67541

Amount of Each Disbursement this Period

4501.86

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8309.94

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6056 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. HARRISON, JESSICA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70436

Amount of Each Disbursement this Period

4504.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HAYES, EMILEIGH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67541

Amount of Each Disbursement this Period

2690.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HAYES, EMILEIGH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70436

Amount of Each Disbursement this Period

2690.59

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

9885.89

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6057 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. HUDSON, ANDREW, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67541

Amount of Each Disbursement this Period

2168.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HUDSON, ANDREW, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70436

Amount of Each Disbursement this Period

2168.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INGHAM, ANA MARINA, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67541

Amount of Each Disbursement this Period

2540.91

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

6877.57

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6058 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. INGHAM, ANA MARINA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.70436

Amount of Each Disbursement this Period

2765.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JUSTEMA, CHRISTOPHER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.67542

Amount of Each Disbursement this Period

1945.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JUSTEMA, CHRISTOPHER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.70431

Amount of Each Disbursement this Period

1887.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6598.63

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6059 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. KILEY, WILLIAM, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.6754

Amount of Each Disbursement this Period

3949.63

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KILEY, WILLIAM, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70436

Amount of Each Disbursement this Period

3949.63

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KRAUS, JUSTIN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.6754

Amount of Each Disbursement this Period

2025.37

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

9924.63

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6060 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. KRAUS, JUSTIN, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.70437

Amount of Each Disbursement this Period

2025.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KROEGER, MICHAEL, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.67542

Amount of Each Disbursement this Period

4277.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KROEGER, MICHAEL, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.70437

Amount of Each Disbursement this Period

4277.40

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

10580.17



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6061 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A.** KURE, HAYED, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.6754

Amount of Each Disbursement this Period

2998.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** KURE, HAYED, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.70437

Amount of Each Disbursement this Period

2998.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** LANG, ROBERT, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.6754

Amount of Each Disbursement this Period

2348.68

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8345.44

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6062 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A.** LAZIC, DANIJELA, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.67542

Amount of Each Disbursement this Period

1706.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** LAZIC, DANIJELA, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.70437

Amount of Each Disbursement this Period

1706.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** LIVELY, HALEY, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.67542

Amount of Each Disbursement this Period

2364.13

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5777.75

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6063 OF 6441

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. LIVELY, HALEY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.70437**

Amount of Each Disbursement this Period

2364.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LOPS, JUSTIN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.67542**

Amount of Each Disbursement this Period

2040.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LOPS, JUSTIN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.70437**

Amount of Each Disbursement this Period

2040.74

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

6445.61

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6064 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. LUONGO, DANIEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67543

Amount of Each Disbursement this Period

3393.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LUONGO, DANIEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70437

Amount of Each Disbursement this Period

3393.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MANZO, KATHRYN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67543

Amount of Each Disbursement this Period

905.12

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7692.70

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6065 OF 6441

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. MARINELLA, MICHAEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.67543**

Amount of Each Disbursement this Period

3281.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARINELLA, MICHAEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.70437**

Amount of Each Disbursement this Period

3412.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARKS, BRADLEY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.67543**

Amount of Each Disbursement this Period

1777.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8471.69

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6066 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MARKS, BRADLEY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70437

Amount of Each Disbursement this Period

1777.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCCRADY, JEFFREY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67543

Amount of Each Disbursement this Period

4277.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCCRADY, JEFFREY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70437

Amount of Each Disbursement this Period

4277.39

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10332.28

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6067 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. MCLAREN, ANDREW, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67543

Amount of Each Disbursement this Period

1805.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MCLAREN, ANDREW, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70438

Amount of Each Disbursement this Period

1805.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MILES, GINA, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.6754

Amount of Each Disbursement this Period

6415.48

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

10026.78

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6068 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MILES, GINA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

6415.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MULLIS, HUNTER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67544

Amount of Each Disbursement this Period

4099.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MULLIS, HUNTER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

4099.57

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

14614.62



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6069 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. MURPHY, MICHAEL, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67544

Amount of Each Disbursement this Period

5066.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MURPHY, MICHAEL, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70438

Amount of Each Disbursement this Period

5066.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NGUYEN, JENNIFER, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70438

Amount of Each Disbursement this Period

1963.26

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

12096.90

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6070 OF 6441

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. O'LEARY, JUAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.70438**

Amount of Each Disbursement this Period

2118.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. O'TOOLE, MAUREEN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.70438**

Amount of Each Disbursement this Period

1728.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ONNEN, CATHERINE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.6754**

Amount of Each Disbursement this Period

1274.74

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5122.11

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6071 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ONNEN, CATHERINE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

1274.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OSORIO, JOHN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67544

Amount of Each Disbursement this Period

1784.87

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. OSORIO, JOHN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

1784.87

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4844.49

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6072 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. PACK, JOSHUA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67544

Amount of Each Disbursement this Period

1877.36

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PACK, JOSHUA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70438

Amount of Each Disbursement this Period

1877.36

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PANDOL, JACK, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67544

Amount of Each Disbursement this Period

6487.48

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10242.20

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6073 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. PANDOL, JACK, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.7043**

Amount of Each Disbursement this Period

6487.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PELLETIER, MELISSA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.67544**

Amount of Each Disbursement this Period

1685.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PELLETIER, MELISSA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.7043**

Amount of Each Disbursement this Period

1685.81

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9859.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6074 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. PETERSEN, BENJAMIN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67544

Amount of Each Disbursement this Period

2771.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PETERSEN, BENJAMIN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70439

Amount of Each Disbursement this Period

3459.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PITTS, DERRICK, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67544

Amount of Each Disbursement this Period

1927.49

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8157.68

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6075 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. PITTS, DERRICK, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

2436.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PLUCKER, KARLI, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.67545

Amount of Each Disbursement this Period

3522.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PLUCKER, KARLI, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

3522.43

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

9481.81

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6076 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. PRESTWOOD, SARAH GRACE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

**C****Transaction ID : SB21-0.6754**

Amount of Each Disbursement this Period

2557.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PRESTWOOD, SARAH GRACE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

**C****Transaction ID : SB21-0.70439**

Amount of Each Disbursement this Period

2557.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. REINERT, WILLIAM, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

**C****Transaction ID : SB21-0.6754**

Amount of Each Disbursement this Period

3889.26

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

9004.08

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6077 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. REINERT, WILLIAM, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

3889.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RENNA, RAYCHEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.67545

Amount of Each Disbursement this Period

3968.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RENNA, RAYCHEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.7043

Amount of Each Disbursement this Period

3968.78

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

11826.82

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6078 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. REYNOLDS, CAROLINE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.6754

Amount of Each Disbursement this Period

3341.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. REYNOLDS, CAROLINE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70439

Amount of Each Disbursement this Period

3341.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RICKARD, DONALD, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.6754

Amount of Each Disbursement this Period

4098.28

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

10780.94

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6079 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. RICKARD, DONALD, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70435

Amount of Each Disbursement this Period

4098.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ROGERS, ANNE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67545

Amount of Each Disbursement this Period

1891.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ROGERS, ANNE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70441

Amount of Each Disbursement this Period

1891.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7880.88

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6080 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ROSICHAN, WILLIAM, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.67545**

Amount of Each Disbursement this Period

2645.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ROSICHAN, WILLIAM, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.70440**

Amount of Each Disbursement this Period

2645.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ROTH, EVAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.67545**

Amount of Each Disbursement this Period

2399.78

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7691.06

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6081 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ROTH, EVAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

**C****Transaction ID : SB21-0.7044c**

Amount of Each Disbursement this Period

2399.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RUILOBA, SOFIA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

**C****Transaction ID : SB21-0.67545**

Amount of Each Disbursement this Period

2749.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RUILOBA, SOFIA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

**C****Transaction ID : SB21-0.7044i**

Amount of Each Disbursement this Period

2749.69

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7899.16

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6082 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SAUNDERS, GRANT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67546

Amount of Each Disbursement this Period

429.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SAUNDERS, GRANT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70440

Amount of Each Disbursement this Period

429.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCHANNO, WILLIAM, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67541

Amount of Each Disbursement this Period

3288.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4148.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6083 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. SCHANNO, WILLIAM, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C Transaction ID : SB21-0.7044c

Amount of Each Disbursement this Period

3070.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SEELEY, RYAN, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C Transaction ID : SB21-0.67546

Amount of Each Disbursement this Period

3800.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SEELEY, RYAN, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C Transaction ID : SB21-0.7044i

Amount of Each Disbursement this Period

3800.79

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10672.39

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6084 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SINGH, SWATI, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.7044c

Amount of Each Disbursement this Period

2155.61

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SOLOMAN, JARED, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67546

Amount of Each Disbursement this Period

362.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SOLOMAN, JARED, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.7044i

Amount of Each Disbursement this Period

362.52

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2880.65

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6085 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SORRENTINO, VINCENT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.67546

Amount of Each Disbursement this Period

2171.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SORRENTINO, VINCENT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.70440

Amount of Each Disbursement this Period

2505.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SPENCER, SAM, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.67546

Amount of Each Disbursement this Period

4540.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

9217.70

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6086 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SPENCER, SAM, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.70441

Amount of Each Disbursement this Period

4540.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STEELE, GREGORY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.67546

Amount of Each Disbursement this Period

3133.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STEELE, GREGORY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.70441

Amount of Each Disbursement this Period

3133.03

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

10806.10

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6087 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SUMNER, BENJAMIN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67546

Amount of Each Disbursement this Period

1959.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SUMNER, BENJAMIN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70441

Amount of Each Disbursement this Period

1959.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THOM, MICHAEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67541

Amount of Each Disbursement this Period

7023.41

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10942.51

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6088 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. THOM, MICHAEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.70441

Amount of Each Disbursement this Period

7023.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TONIZZO, KYLAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.67546

Amount of Each Disbursement this Period

1959.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TONIZZO, KYLAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.7044

Amount of Each Disbursement this Period

1959.51

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10942.43

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6089 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. VERDERAME, DYLAN, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67547

Amount of Each Disbursement this Period

1134.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VERDERAME, DYLAN, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70441

Amount of Each Disbursement this Period

1134.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WEBER, MERRILL, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67547

Amount of Each Disbursement this Period

4644.62

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

6914.06

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6090 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. WEBER, MERRILL, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70441

Amount of Each Disbursement this Period

4644.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WEHRMAN, JAKE, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67547

Amount of Each Disbursement this Period

3471.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WEHRMAN, JAKE, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70441

Amount of Each Disbursement this Period

3471.30

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

11587.22

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6091 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WEINHOLD, DAWSON, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.67547

Amount of Each Disbursement this Period

1785.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WEINHOLD, DAWSON, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.70442

Amount of Each Disbursement this Period

1785.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WILLIAMS, LAUREN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.67547

Amount of Each Disbursement this Period

2710.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6281.34

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6092 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WINEGAR, THERESA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.67547

Amount of Each Disbursement this Period

6185.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINEGAR, THERESA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.70442

Amount of Each Disbursement this Period

6185.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WITWER, JOHN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.67547

Amount of Each Disbursement this Period

1900.37

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

14271.73



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6093 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. WITWER, JOHN, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70442

Amount of Each Disbursement this Period

1884.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WOOD, SARAH, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67547

Amount of Each Disbursement this Period

2716.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WOOD, SARAH, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70442

Amount of Each Disbursement this Period

2716.23

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

7317.26

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6094 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. WOODY, TALLYE, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67547

Amount of Each Disbursement this Period

1947.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WOODY, TALLYE, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70442

Amount of Each Disbursement this Period

1947.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WORTMANN, PATRICK, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67547

Amount of Each Disbursement this Period

2498.76

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6394.52

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6095 OF 6441

<input checked="checked" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WORTMANN, PATRICK, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.70442

Amount of Each Disbursement this Period

2615.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. YOUSEFI, MICAH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.67548

Amount of Each Disbursement this Period

8033.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. YOUSEFI, MICAH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21-0.70442

Amount of Each Disbursement this Period

8033.27

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

18681.65

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6096 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. ZENN, JAMES, , ,

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

PAYROLL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.6754

Amount of Each Disbursement this Period

3497.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ACS FUNDRAISING

Mailing Address 10748 EDEN ROC DRIVE

City  
DALLASState  
TXZip Code  
75238

Purpose of Disbursement

FINANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.65547

Amount of Each Disbursement this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AEGIS

Mailing Address 240 SE MADISON ST

City  
TOPEKAState  
KSZip Code  
66607

Purpose of Disbursement

DATA PROCESSING SERVICE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.6791

Amount of Each Disbursement this Period

11256.17

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

34753.42

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6097 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ALIGN CFO SOLUTIONS LLC**Mailing Address 2020 FIELDSTONE PARKWAY  
STE 900 NO 238City  
FRANKLINState  
TNZip Code  
37069Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

FEC Identification Number

C Transaction ID : SB21-0.67917

Amount of Each Disbursement this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICA RISING LLC**Mailing Address 1500 WILSON BLVD, 5TH FL  
C/O ACCOUNTS RECEIVABLECity  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

FEC Identification Number

C Transaction ID : SB21-0.67917

Amount of Each Disbursement this Period

125000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS MERCHANT ACCOUNT**

Mailing Address PO BOX 981532

City  
EL PASOState  
TXZip Code  
79998Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

FEC Identification Number

C Transaction ID : SB21-0.6740

Amount of Each Disbursement this Period

236.04

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

145236.04

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6098 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address PO BOX 1270

City  
NEWARKState  
NJZip Code  
07101-1270Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.70406

Amount of Each Disbursement this Period

287029.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AIR TABLE**

Mailing Address 799 MARKET ST

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
WEB SERVICE

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.95117

Amount of Each Disbursement this Period

356.16

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALERTMEDIA**

Mailing Address 401 S 1ST ST UNIT 1400

City  
AUSTINState  
TXZip Code  
78704Purpose of Disbursement  
SECURITY SERVICE

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.95117

Amount of Each Disbursement this Period

3021.00

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

287029.31

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6099 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. AMAZON.COM**

Mailing Address 1200 12TH AVE

City  
SEATTLEState  
WAZip Code  
98144

Purpose of Disbursement

OFFICE SUPPLIES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.95117

Amount of Each Disbursement this Period

2128.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address PO BOX 620081

City  
DALLASState  
TXZip Code  
75262

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.95117

Amount of Each Disbursement this Period

6238.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN TRUCKING ASSN**

Mailing Address PO BOX 101360

City  
ARLINGTONState  
VAZip Code  
22210

Purpose of Disbursement

PARKING SERVICE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.95117

Amount of Each Disbursement this Period

2600.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6100 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. AMERICAN WATER**

Mailing Address 1 WATER ST

City  
CAMDENState  
NJZip Code  
08102Purpose of Disbursement  
UTILITIES

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.95118

Amount of Each Disbursement this Period

297.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. ARAMARK**

Mailing Address PO BOX 21971

City  
NEW YORKState  
NYZip Code  
10087Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.95118

Amount of Each Disbursement this Period

452.53

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BJ'S WHOLESALE CLUB**

Mailing Address 1 MERCER RD

City  
NATICKState  
MAZip Code  
01760Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.95118

Amount of Each Disbursement this Period

1915.31

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6101 OF 6441

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CHARTER COMMUNICATIONS**

Mailing Address 400 WASHINGTON BLVD

City  
STAMFORDState  
CTZip Code  
06902

Purpose of Disbursement

UTILITIES

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.9512C

Amount of Each Disbursement this Period

377.96

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. COMCAST CABLE**

Mailing Address PO BOX 3005

City  
SOUTHEASTERNState  
PAZip Code  
19398-3005

Purpose of Disbursement

UTILITIES

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.9512C

Amount of Each Disbursement this Period

2028.65

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. CONGRESSIONAL LIQUORS**

Mailing Address 404 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

FOOD/BEVERAGE

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.9512C

Amount of Each Disbursement this Period

206.08

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6102 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. COX COMMUNICATIONS**

Mailing Address 6205 PEACHTREE DUNWOODY RD

City  
ATLANTAState  
GAZip Code  
30328

Purpose of Disbursement

SUBSCRIPTION

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.95121

Amount of Each Disbursement this Period

643.13

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. DOORDASH INC.**Mailing Address 901 MARKET ST  
STE 600City  
SAN FRANCISCOState  
CAZip Code  
94103

Purpose of Disbursement

FOOD/BEVERAGE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.95122

Amount of Each Disbursement this Period

1342.73

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. EZ CATERING INC**Mailing Address 101 ARCH STREET  
STE 1510City  
BOSTONState  
MAZip Code  
02110

Purpose of Disbursement

FOOD/BEVERAGE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.9512:

Amount of Each Disbursement this Period

303.04

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6103 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address PO BOX 672085

City  
DALLASState  
TXZip Code  
75267-2085

Purpose of Disbursement

DELIVERY

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.95123

Amount of Each Disbursement this Period

572.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRAME OF MINE**

Mailing Address 545 8TH ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.95123

Amount of Each Disbursement this Period

802.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. GANNETT CO., INC,**

Mailing Address 7950 JONES BRANCH DR

City  
MC LEANState  
VAZip Code  
22107

Purpose of Disbursement

SUBSCRIPTION

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.95123

Amount of Each Disbursement this Period

217.19

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6104 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GODADDY.COM**Mailing Address 14455 N HAYDEN RD  
STE 226City  
SCOTTSDALEState  
AZZip Code  
85260

Purpose of Disbursement

WEB SERVICE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.95124

Amount of Each Disbursement this Period

460.08

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. GOOGLE INC**

Mailing Address PO BOX 883654

City  
LOS ANGELESState  
CAZip Code  
90088

Purpose of Disbursement

WEB SERVICE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.95124

Amount of Each Disbursement this Period

638.53

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. GRABIEN INC**

Mailing Address 1820 AVE M

City  
BROOKLYNState  
NYZip Code  
11230

Purpose of Disbursement

SUBSCRIPTION

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : SB21-0.95124

Amount of Each Disbursement this Period

1650.00

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6105 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. HERTZ CORPORATION**

Mailing Address 8501 WILLIAMS RD

City  
ESTEROState  
FLZip Code  
33928

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.95125

Amount of Each Disbursement this Period

3175.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. LAZ PARKING**

Mailing Address PO BOX 759498

City  
BALTIMOREState  
MDZip Code  
21275

Purpose of Disbursement

PARKING

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.95126

Amount of Each Disbursement this Period

820.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. LOGMEIN INC.**

Mailing Address 320 SUMMER STREET

City  
BOSTONState  
MAZip Code  
02210

Purpose of Disbursement

DATABASE SERVICE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.95121

Amount of Each Disbursement this Period

622.07

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6106 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MAC BUSINESS SOLUTIONS**

Mailing Address 9057 GAITHER RD

City  
GAITHERSBURGState  
MDZip Code  
20877Purpose of Disbursement  
EQUIPMENT PURCHASE

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.95127

Amount of Each Disbursement this Period

5784.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MAILCHIMP**Mailing Address 675 PONCE DE LEON AVE NE  
STE 404City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.95127

Amount of Each Disbursement this Period

891.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARRIOTT HOTELS**

Mailing Address 10400 FERNWOOD RD

City  
BETHESDAState  
MDZip Code  
20817Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.95127

Amount of Each Disbursement this Period

4561.33

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6107 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MICROSOFT CORPORATION**

Mailing Address 1 MICROSOFT WAY

City  
REDMONDState  
WAZip Code  
98052-7329Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.95127

Amount of Each Disbursement this Period

6623.06

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. NATIONAL INDIAN GAMING ASSOCIATION**

Mailing Address 224 2ND ST., SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FACILITY RENTAL

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.95128

Amount of Each Disbursement this Period

350.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. NEC CO-OP ENERGY**

Mailing Address 14353 COOPERATIVE AVE

City  
ROBSTOWNState  
TXZip Code  
78380Purpose of Disbursement  
UTILITIES

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.95121

Amount of Each Disbursement this Period

200.76

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6108 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NIFTYIMAGES LLC**Mailing Address 10640 MATHER BLVD  
STE 110City  
MATHERState  
CAZip Code  
95655Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.9512

Amount of Each Disbursement this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. POLY & BARK**Mailing Address 8 THE GREEN  
STE BCity  
DOVERState  
DEZip Code  
19901Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.9513

Amount of Each Disbursement this Period

1778.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. RUGGABLE**

Mailing Address 17809 S BROADWAY

City  
GARDENAState  
CAZip Code  
90248Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.9513

Amount of Each Disbursement this Period

656.14

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0	0	0											
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6109 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SLACK**Mailing Address 155 5TH ST  
6TH FLOORCity  
SAN FRANCISCOState  
CAZip Code  
94103

Purpose of Disbursement

WEB SERVICE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.95133

Amount of Each Disbursement this Period

455.45

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. SOUNDVIEW STRATEGIES**

Mailing Address 50 GRAVESEND AVE

City  
MONTAUKState  
NYZip Code  
11954

Purpose of Disbursement

FINANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.95133

Amount of Each Disbursement this Period

14224.55

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE RITZ CARLTON HOTEL CO**Mailing Address 4445 WILLARD AVE.  
STE 800City  
CHEVY CHASEState  
MDZip Code  
20815

Purpose of Disbursement

FACILITY RENTAL/CATERING

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.95133

Amount of Each Disbursement this Period

200000.00

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6110 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. TOPS PRODUCTS**Mailing Address 1648 MCGRATHIANA PKWY  
STE 130City  
LEXINGTONState  
KYZip Code  
40511

Purpose of Disbursement

OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.95134

Amount of Each Disbursement this Period

1155.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 55 GLENLAKE PARKWAY

City  
ATLANTAState  
GAZip Code  
30328

Purpose of Disbursement

DELIVERY

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.95136

Amount of Each Disbursement this Period

770.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. VERIZON WIRELESS**

Mailing Address PO BOX 25505

City  
LEHIGH VALLEYState  
PAZip Code  
18002-5505

Purpose of Disbursement

TELEPHONE SERVICE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.95131

Amount of Each Disbursement this Period

5137.68

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6111 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. VERNAL**

Mailing Address 401 RYLAND ST

City  
RENOState  
NVZip Code  
89502

Purpose of Disbursement

OFFICE SUPPLIES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.95136

Amount of Each Disbursement this Period

974.13

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. WAYFAIR LLC**Mailing Address 4 COPLEY PLACE  
7TH FLOORCity  
BOSTONState  
MAZip Code  
02116

Purpose of Disbursement

OFFICE SUPPLIES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.95137

Amount of Each Disbursement this Period

3859.24

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINE.COM**Mailing Address 222 SUTTER ST  
STE 450City  
SAN FRANCISCOState  
CAZip Code  
94108

Purpose of Disbursement

FOOD/BEVERAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.95137

Amount of Each Disbursement this Period

247.40

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6112 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. XCEL ENERGY INC**

Mailing Address 414 NICOLLET MALL

City  
MINNEAPOLISState  
MNZip Code  
55401

Purpose of Disbursement

UTILITIES

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.95137

Amount of Each Disbursement this Period

1095.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. ZOOM VIDEO COMMUNICATIONS INC.**Mailing Address 55 ALMADEN BLVD  
6TH FLOORCity  
SAN JOSEState  
CAZip Code  
95113

Purpose of Disbursement

WEB SERVICE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.95138

Amount of Each Disbursement this Period

1095.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT, INC.**Mailing Address 1920 MCKINNEY AVE  
7TH FLOORCity  
DALLASState  
TXZip Code  
75201

Purpose of Disbursement

BANK FEE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.67391

Amount of Each Disbursement this Period

1211.80

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1211.80

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6113 OF 6441

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. ANEDOT, INC.**Mailing Address 1920 MCKINNEY AVE  
7TH FLOORCity  
DALLASState  
TXZip Code  
75201

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	1			2	0	2	5		

FEC Identification Number

**C**   
**Transaction ID : SB21-0.69246**

Amount of Each Disbursement this Period

 399.25
☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT, INC.**Mailing Address 1920 MCKINNEY AVE  
7TH FLOORCity  
DALLASState  
TXZip Code  
75201

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

**C**   
**Transaction ID : SB21-0.70879**

Amount of Each Disbursement this Period

 276.90
☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BASE ENGAGER, LLC**

Mailing Address 122 NORTH VALE STREET

City  
JEFFERSONState  
TXZip Code  
75657

Purpose of Disbursement

LIST RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5		

FEC Identification Number

**C**   
**Transaction ID : SB21-0.6791**

Amount of Each Disbursement this Period

 4375.76
☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►
 5051.91

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6114 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BELIEVE MEDIA LLC**

Mailing Address 10660 PAGE AVE #65

City  
FAIRFAXState  
VAZip Code  
22038

Purpose of Disbursement

LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67917

Amount of Each Disbursement this Period

21770.49

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BILL.COM**

Mailing Address 1810 EMBARCADERO ROAD

City  
PALO ALTOState  
CAZip Code  
94303

Purpose of Disbursement

BANK FEE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	5		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70868

Amount of Each Disbursement this Period

1785.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

CATERING

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	0		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.9183

Amount of Each Disbursement this Period

14825.20

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

38381.04

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6115 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVENUE

City  
MCLEANState  
VAZip Code  
22101

Purpose of Disbursement

INTEREST EXPENSE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.7086

Amount of Each Disbursement this Period

79727.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**Mailing Address 1593 SPRING HILL ROAD  
STE 400City  
VIENNAState  
VAZip Code  
22182

Purpose of Disbursement

LIST MAINTENANCE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67918

Amount of Each Disbursement this Period

11705.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**Mailing Address 1593 SPRING HILL ROAD  
STE 400City  
VIENNAState  
VAZip Code  
22182

Purpose of Disbursement

HQ ACCT - LIST MAINTENANCE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.6792

Amount of Each Disbursement this Period

19389.64

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

110822.69

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6116 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. COGENT COMMUNICATIONS INC**

Mailing Address PO BOX 791087

City  
BALTIMOREState  
MDZip Code  
21279-1087Purpose of Disbursement  
HQ ACCT - WEB SERVICE

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.65548

Amount of Each Disbursement this Period

2489.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CONCUR TECHNOLOGIES INC**

Mailing Address 62157 COLLECTIONS CENTER DR

City  
CHICAGOState  
ILZip Code  
60693Purpose of Disbursement  
HQ ACCT - COMPUTER SUPPORT

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.65548

Amount of Each Disbursement this Period

718.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CORCORAN STRATEGIES**

Mailing Address 200 CIRCLE AVE

City  
CHARLOTTEState  
NCZip Code  
28207Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.65548

Amount of Each Disbursement this Period

17731.46

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20939.64



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6117 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CROSBY OTTENHOFF GROUP**

Mailing Address 611 PENNSYLVANIA AVE., SE #267

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.65547

Amount of Each Disbursement this Period

12500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DANIEL FOSCO DESIGNS**

Mailing Address 440 PENN ST NE, APT 700

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
DIGITAL CONSULTING

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.67918

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DC TREASURER**Mailing Address OFFICE OF TAX AND REVENUE  
PO BOX 96019City  
WASHINGTONState  
DCZip Code  
20090-6019Purpose of Disbursement  
TAXES

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.7086

Amount of Each Disbursement this Period

967.80

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

15967.80

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6118 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DEMOCRACY ENGINE, LLC**

Mailing Address 237 FLORIDA AVE, NW

City  
WASHINGTONState  
DCZip Code  
20001

Purpose of Disbursement

CONTRIBUTION PROCESSING FEE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	1			2	0	2	5	

FEC Identification Number

C  
Transaction ID : SB21-0.7089C

Amount of Each Disbursement this Period

636.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEMOCRACY ENGINE, LLC**

Mailing Address 237 FLORIDA AVE, NW

City  
WASHINGTONState  
DCZip Code  
20001

Purpose of Disbursement

CONTRIBUTION PROCESSING FEE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	6			2	0	2	5	

FEC Identification Number

C  
Transaction ID : SB21-0.7089I

Amount of Each Disbursement this Period

1242.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DONOR BUREAU, LLC**

Mailing Address 1900 N CULPEPER ST

City  
ARLINGTONState  
VAZip Code  
22207

Purpose of Disbursement

LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5	

FEC Identification Number

C  
Transaction ID : SB21-0.6791I

Amount of Each Disbursement this Period

21455.89

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

23334.49

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6119 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ELAVON**Mailing Address ONE CONCOURSE PKWY  
STE 300City  
ATLANTAState  
GAZip Code  
30328

Purpose of Disbursement

BANK FEE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67402

Amount of Each Disbursement this Period

2913.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FP1 DIGITAL**Mailing Address 3001 WASHINGTON BLVD  
7TH FLCity  
ARLINGTONState  
VAZip Code  
22201

Purpose of Disbursement

WEB SERVICE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67918

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRONTLINE STRATEGIES LLC**

Mailing Address 4 HOLLY LANE

City  
MOHNTONState  
PAZip Code  
19540

Purpose of Disbursement

LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67918

Amount of Each Disbursement this Period

68999.32

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

76912.38

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6120 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. G&G OUTFITTERS INC**

Mailing Address PO BOX 37121

City  
BALTIMOREState  
MDZip Code  
21297

Purpose of Disbursement

DONOR MEMENTOS - DONOR CARDS

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67918

Amount of Each Disbursement this Period

11797.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HDS**

Mailing Address 633 NAPOR BOULEVARD

City  
PITTSBURGHState  
PAZip Code  
15205

Purpose of Disbursement

DONOR MEMENTOS - MEMBERSHIP CARDS

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67918

Amount of Each Disbursement this Period

4243.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

City  
KINGWOODState  
TXZip Code  
77339

Purpose of Disbursement

PAYROLL SVC/TAXES/INSURANCE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67361

Amount of Each Disbursement this Period

1279.35

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

17320.07

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6121 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

City  
KINGWOODState  
TXZip Code  
77339Purpose of Disbursement  
PAYROLL SVC/TAXES/INSURANCE

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

C Transaction ID : SB21-0.6745C

Amount of Each Disbursement this Period

261436.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

City  
KINGWOODState  
TXZip Code  
77339Purpose of Disbursement  
PAYROLL SVC/TAXES/INSURANCE

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

C Transaction ID : SB21-0.70418

Amount of Each Disbursement this Period

250768.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KONICA MINOLTA**Mailing Address PO BOX 41602  
ATTN: SHARON BROWNCity  
PHILADELPHIAState  
PAZip Code  
19101-1602Purpose of Disbursement  
HQ ACCT - EQUIPMENT RENTAL

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	5	

FEC Identification Number

C Transaction ID : SB21-0.6554I

Amount of Each Disbursement this Period

1742.34

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

513947.19

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6122 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. LCC, INC.**

Mailing Address 1125 PARK WEST DRIVE

City  
CHARLOTTEState  
NCZip Code  
28209

Purpose of Disbursement

FINANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.62867

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LILLY & COMPANY**Mailing Address 1005 CONGRESS AVE  
SUITE 400City  
AUSTINState  
TXZip Code  
78701

Purpose of Disbursement

FINANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.62868

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LISTWISE, LLC**Mailing Address 1423 W BELMONT AVE  
UNIT 3City  
CHICAGOState  
ILZip Code  
60657

Purpose of Disbursement

LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67911

Amount of Each Disbursement this Period

1559.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

11859.70

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6123 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MAXIMUM COMPLIANCE, LLC**

Mailing Address 4703 WOODWAY LN NW

City  
WASHINGTONState  
DCZip Code  
20016Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.62866

Amount of Each Disbursement this Period

12500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MOORE RESPONSE MANAGEMENT GROUP**

Mailing Address 240 SE MADISON STREET

City  
TOPEKAState  
KSZip Code  
66607-1147Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.65124

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MOORE, LLC**Mailing Address 4200 PARLIAMENT PLACE  
3RD FLOORCity  
LANHAMState  
MDZip Code  
20706Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67911

Amount of Each Disbursement this Period

5782.97

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

33282.97

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6124 OF 6441

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. O2M DIGITAL, LLC**Mailing Address 123 NORTH COLLEGE AVE  
STE 390City  
FORT COLLINSState  
COZip Code  
80524

Purpose of Disbursement

LIST RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.67919**

Amount of Each Disbursement this Period

15426.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ONMESSAGE INC**Mailing Address 716 GIDDINGS AVE  
STE 41City  
ANNAPOLISState  
MDZip Code  
21401

Purpose of Disbursement

POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.67919**

Amount of Each Disbursement this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. OXFORD COMMUNICATIONS, LLC**

Mailing Address PO BOX 1198

City  
GREAT FALLSState  
VAZip Code  
22066

Purpose of Disbursement

TELEMARKETING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21-0.67391**

Amount of Each Disbursement this Period

33701.91

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74128.85



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6125 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. P2P MESSAGING SOLUTIONS**

Mailing Address 1390 CHAIN BRIDGE RD STE 54

City  
MCLEANState  
VAZip Code  
22013

Purpose of Disbursement

LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0		2	0	5			

FEC Identification Number

C

Transaction ID : SB21-0.6791

Amount of Each Disbursement this Period

6962.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PITNEY BOWES PRESORT SERVICES**Mailing Address 270 REMINGTON BLVD.  
STE BCity  
BOLINGBROOKState  
ILZip Code  
60440-3593

Purpose of Disbursement

POSTAGE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	2		2	0	5			

FEC Identification Number

C

Transaction ID : SB21-0.65842

Amount of Each Disbursement this Period

80327.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RACONTEUR MEDIA COMPANY**

Mailing Address PO BOX 26511

City  
AUSTINState  
TXZip Code  
78755

Purpose of Disbursement

LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0		2	0	5			

FEC Identification Number

C

Transaction ID : SB21-0.6791

Amount of Each Disbursement this Period

2273.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

89563.06

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6126 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. RED AMERICA MARKETING LLC**

Mailing Address 1390 CHAIN BRIDGE RD STE 27

City  
MCLEANState  
VAZip Code  
22101

Purpose of Disbursement

LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67919

Amount of Each Disbursement this Period

23880.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RED RIVER DATA, LLC**Mailing Address C/O MSWANIGER BUSINESS SERVICES  
8501 BAYSIDE RD., SUITE C4-DCity  
CHESAPEAKE BEACHState  
MDZip Code  
20732

Purpose of Disbursement

LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67919

Amount of Each Disbursement this Period

3112.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RIGHT COUNTRY LISTS**

Mailing Address 117 NORTH SAINT ASAPH STREET

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67919

Amount of Each Disbursement this Period

88580.26

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

115572.82

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6127 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. RIGHT RAIL LIST CO**

Mailing Address 704 MELVIN AVENUE, #105

City  
ANNAPOLISState  
MDZip Code  
21401

Purpose of Disbursement

LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67920

Amount of Each Disbursement this Period

3894.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ROC MEDIA LLC**

Mailing Address 1309 COFFEEN AVENUE

City  
SHERIDANState  
WYZip Code  
82801

Purpose of Disbursement

LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67920

Amount of Each Disbursement this Period

16790.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ROCK CONSULTING LLC**

Mailing Address 5382 MEADOWBROOK RD

City  
BIRMINGHAMState  
ALZip Code  
35242

Purpose of Disbursement

HQ ACCT - COMPLIANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.62861

Amount of Each Disbursement this Period

5500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

26184.67

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6128 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. RST MARKETING ASSOCIATES INC**

Mailing Address 1272 CORPORATE PARK DRIVE

City  
FORESTState  
VAZip Code  
24551

Purpose of Disbursement

PRINTING

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.6792c

Amount of Each Disbursement this Period

11144.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SMS DIRECT INC**

Mailing Address 8461 VIRGINIA MEADOWS DRIVE

City  
MANASSASState  
VAZip Code  
20109

Purpose of Disbursement

POSTAGE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.62070

Amount of Each Disbursement this Period

33178.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SNAILWORKS, LLC**

Mailing Address 4510 BUCKEYESTOWN PIKE

City  
FREDERICKState  
MDZip Code  
21704

Purpose of Disbursement

LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.6792i

Amount of Each Disbursement this Period

1100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

45423.93

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6129 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SPECIAL PAINTING SERVICES**

Mailing Address 8208 MILLFIELD CT

City  
MILLERSVILLEState  
MDZip Code  
21108

Purpose of Disbursement

HQ ACCT - BUILDING MAINTENANCE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.6554

Amount of Each Disbursement this Period

4600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ST. JAMES STRATEGIES**

Mailing Address 201 PINE STREET

City  
ALEXANDRIAState  
VAZip Code  
22305

Purpose of Disbursement

POLITICAL STRATEGY CONSULTING

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.62868

Amount of Each Disbursement this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRATEGIC ADVANCE SERVICES LLC**Mailing Address 611 PENNSYLVANIA AVE SE  
STE 267City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

TRAVEL RESERVATION/BOOKING SVC

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.6554

Amount of Each Disbursement this Period

12720.15

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37320.15

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6130 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH ST

City  
SAN FRANCISCOState  
CAZip Code  
94110

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67385

Amount of Each Disbursement this Period

211.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TARGETED VICTORY**Mailing Address 2311 WILSON BLVD  
STE 200City  
ARLINGTONState  
VAZip Code  
22201

Purpose of Disbursement

DIGITAL CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67920

Amount of Each Disbursement this Period

914493.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TEAM DIRECT**Mailing Address 1050 JOHNNIE DODDS BLVD  
STE 368City  
MOUNT PLEASANTState  
SCZip Code  
29465

Purpose of Disbursement

POSTAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.6207:

Amount of Each Disbursement this Period

34424.67

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

949129.64

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6131 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. THE GRONEMAN GROUP INC**

Mailing Address 124 DOCK ROAD

City  
EAST ISLIPState  
NYZip Code  
11730-2905

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.65547

Amount of Each Disbursement this Period

4252.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE LUKENS COMPANY**Mailing Address 2800 SHIRLINGTON RD  
9TH FLOORCity  
ARLINGTONState  
VAZip Code  
22206-3613

Purpose of Disbursement

POSTAGE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.62071

Amount of Each Disbursement this Period

52248.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE LUKENS COMPANY**Mailing Address 2800 SHIRLINGTON RD  
9TH FLOORCity  
ARLINGTONState  
VAZip Code  
22206-3613

Purpose of Disbursement

PRINTING

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67911

Amount of Each Disbursement this Period

119056.40

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

175557.96

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6132 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. THE MAIL HAUS**

Mailing Address 1745 SUBURBAN DRIVE

City  
DE PEREState  
WIZip Code  
54115

Purpose of Disbursement

POSTAGE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.69247

Amount of Each Disbursement this Period

1697.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THREE ARBOR INSURANCE, INC.**

Mailing Address 421 OFFICE PARK DRIVE

City  
MOUNTAIN BROOKState  
ALZip Code  
35223

Purpose of Disbursement

HQ ACCT - INSURANCE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.62869

Amount of Each Disbursement this Period

2484.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TRISCENIC PRODUCTION SERVICES INC**

Mailing Address 27615 AVENUE HOPKINS

City  
SANTA CLARITAState  
CAZip Code  
91355

Purpose of Disbursement

HQ ACCT - UTILITIES

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.62861

Amount of Each Disbursement this Period

1558.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5739.50

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6133 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 1455 MARKET ST

City  
SAN FRANCISCOState  
CAZip Code  
94105

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.70405

Amount of Each Disbursement this Period

877.88

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. VELOSIO**

Mailing Address PO BOX 933191

City  
CLEVELANDState  
OHZip Code  
44193

Purpose of Disbursement

HQ ACCT - SOFTWARE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.62869

Amount of Each Disbursement this Period

259.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VELOSIO**

Mailing Address PO BOX 933191

City  
CLEVELANDState  
OHZip Code  
44193

Purpose of Disbursement

HQ ACCT - SOFTWARE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.6792

Amount of Each Disbursement this Period

324.63

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

584.33

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6134 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. VELOSIO**

Mailing Address PO BOX 933191

City  
CLEVELANDState  
OHZip Code  
44193

Purpose of Disbursement

HQ ACCT - COMPUTER SUPPORT

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	8			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.70893

Amount of Each Disbursement this Period

3366.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WASHINGTON METRO AREA TRANSIT AUTHORITY**

Mailing Address 600 5TH ST NW

City  
WASHINGTONState  
DCZip Code  
20001

Purpose of Disbursement

HQ ACCT - TRAVEL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	5			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.70894

Amount of Each Disbursement this Period

1592.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.6251

Amount of Each Disbursement this Period

5562.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10521.65

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6135 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	4			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.62521

Amount of Each Disbursement this Period

2767.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.63287

Amount of Each Disbursement this Period

13382.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.6445

Amount of Each Disbursement this Period

3315.06

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

19465.76

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6136 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	0		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.6556

Amount of Each Disbursement this Period

5392.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.6556

Amount of Each Disbursement this Period

3807.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	2		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB21-0.6556

Amount of Each Disbursement this Period

11078.27

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

20277.77

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6137 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.65991

Amount of Each Disbursement this Period

4506.09

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.67518

Amount of Each Disbursement this Period

4153.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	8			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.6773:

Amount of Each Disbursement this Period

5312.54

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

13972.18

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6138 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.67902

Amount of Each Disbursement this Period

3845.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.68090

Amount of Each Disbursement this Period

12754.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.68692

Amount of Each Disbursement this Period

3039.19

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

19639.26

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6139 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	4			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.68895

Amount of Each Disbursement this Period

3158.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	5			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.69094

Amount of Each Disbursement this Period

3598.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	6			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21-0.7034

Amount of Each Disbursement this Period

9944.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

16700.79

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6140 OF 6441

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

HQ ACCT - BANK FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2025

FEC Identification Number

C

Transaction ID : SB21-0.70343

Amount of Each Disbursement this Period

4434.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WIN RED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

FEC Identification Number

C

Transaction ID : SB21-0.70348

Amount of Each Disbursement this Period

3798.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WP ENGINE**Mailing Address 701 BRAZOS ST  
STE 1602City  
AUSTINState  
TXZip Code  
78701

Purpose of Disbursement

WEB SERVICE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2025

FEC Identification Number

C

Transaction ID : SB21-0.70401

Amount of Each Disbursement this Period

2279.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

8233.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6141 OF 6441

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NRCC**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

ALLOCABLE EXPENSES FROM NRCC ACCT

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.91837

Amount of Each Disbursement this Period

273427.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NRCC**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

ALLOCABLE EXPENSES TO HQ ACCT

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.91837

Amount of Each Disbursement this Period

- 273427.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NRCC**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

ALLOCABLE EXPENSES TO LEGAL ACCT

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21-0.91837

Amount of Each Disbursement this Period

- 142255.54

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

- 142255.54

**TOTAL** This Period (last page this line number only)..... ►

3390281.50

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6142 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input checked="" type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVENUE

City  
MCLEANState  
VAZip Code  
22101

Purpose of Disbursement

LINE OF CREDIT PAYMENT

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	2		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB26-0.67375

Amount of Each Disbursement this Period

500000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVENUE

City  
MCLEANState  
VAZip Code  
22101

Purpose of Disbursement

LINE OF CREDIT PAYMENT

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	5		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB26-0.70410

Amount of Each Disbursement this Period

1600000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVENUE

City  
MCLEANState  
VAZip Code  
22101

Purpose of Disbursement

LINE OF CREDIT PAYMENT

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB26-0.7041:

Amount of Each Disbursement this Period

400000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

2500000.00

TOTAL This Period (last page this line number only).....▶

2500000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6143 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ABDELMALAK, MERVAT, , ,**

Mailing Address 6107 PASO LOS CERRITOS

City  
SAN JOSEState  
CAZip Code  
95120Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ABDELMALAK, MERVAT, , ,**

Mailing Address 6107 PASO LOS CERRITOS

City  
SAN JOSEState  
CAZip Code  
95120Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ABDELMALAK, MERVAT, , ,**

Mailing Address 6107 PASO LOS CERRITOS

City  
SAN JOSEState  
CAZip Code  
95120Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

95.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

285.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6144 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ABDELMALAK, MERVAT, , ,**

Mailing Address 6107 PASO LOS CERRITOS

City  
SAN JOSEState  
CAZip Code  
95120Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ABDELMALAK, MERVAT, , ,**

Mailing Address 6107 PASO LOS CERRITOS

City  
SAN JOSEState  
CAZip Code  
95120Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ABDELMALAK, MERVAT, , ,**

Mailing Address 6107 PASO LOS CERRITOS

City  
SAN JOSEState  
CAZip Code  
95120Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	95.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

285.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6145 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ABDELMALAK, MERVAT, , ,**

Mailing Address 6107 PASO LOS CERRITOS

City  
SAN JOSEState  
CAZip Code  
95120Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALBRECHT, MICHELLE, , ,**

Mailing Address 1593 N 820 E

City  
SHELLEYState  
IDZip Code  
83274Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALBRECHT, MICHELLE, , ,**

Mailing Address 1593 N 820 E

City  
SHELLEYState  
IDZip Code  
83274Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

303.20

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6146 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ALBRECHT, MICHELLE, , ,**

Mailing Address 1593 N 820 E

City  
SHELLEYState  
IDZip Code  
83274Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALCORN, THOMAS, , ,**

Mailing Address 9584 WINTERSET CIRCLE

City  
LITTLETONState  
COZip Code  
80125Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALCORN, THOMAS, , ,**

Mailing Address 9584 WINTERSET CIRCLE

City  
LITTLETONState  
COZip Code  
80125Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	78.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

260.26

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6147 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ALCORN, THOMAS, , ,**

Mailing Address 9584 WINTERSET CIRCLE

City  
LITTLETONState  
COZip Code  
80125Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	52.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.18

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6148 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	52.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.15



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6149 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	52.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.15

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6150 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	52.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.15

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6151 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

C
Transaction ID : SB28A-0.651
Amount of Each Disbursement this Period
52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2025

FEC Identification Number

C
Transaction ID : SB28A-0.651
Amount of Each Disbursement this Period
47.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2025

FEC Identification Number

C
Transaction ID : SB28A-0.651
Amount of Each Disbursement this Period
47.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

147.05

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6152 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	47.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	47.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	47.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

142.50

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6153 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ALLEN, CHARLES, , ,**

Mailing Address 22600 ROYAL RIDGE CT.

City  
LUTZState  
FLZip Code  
33549Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	47.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANDERSON, KELLY, , ,**

Mailing Address 1164 HWY 4

City  
ESTHERVILLEState  
IAZip Code  
51334Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANDERSON, KELLY, , ,**

Mailing Address 1164 HWY 4

City  
ESTHERVILLEState  
IAZip Code  
51334Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

255.70

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6154 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ARFE, LESTER, , ,**

Mailing Address 1530 PALISADE AVE 7A

City  
FORT LEEState  
NJZip Code  
07024Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	320.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BEGLEMAN, SHARON, , ,**Mailing Address 962 WICKENBURG WAY  
APT BCity  
WICKENBURGState  
AZZip Code  
85390Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BEGLEMAN, SHARON, , ,**Mailing Address 962 WICKENBURG WAY  
APT BCity  
WICKENBURGState  
AZZip Code  
85390Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	71.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

462.74

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6155 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BEGLEMAN, SHARON, , ,**Mailing Address 962 WICKENBURG WAY  
APT BCity  
WICKENBURGState  
AZZip Code  
85390Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BENZEL, LIN, , ,**

Mailing Address 980 E. SADDLEHORN RD

City  
SEDONAState  
AZZip Code  
86351Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BENZEL, LIN, , ,**

Mailing Address 980 E. SADDLEHORN RD

City  
SEDONAState  
AZZip Code  
86351Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

279.45

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6156 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BLAUVELT, BARBARA, , ,**

Mailing Address PO BOX 832

City  
LAKE WALESState  
FLZip Code  
33859Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLAUVELT, BARBARA, , ,**

Mailing Address PO BOX 832

City  
LAKE WALESState  
FLZip Code  
33859Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BOFINGER, BARBARA, , ,**

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINTState  
NYZip Code  
11778Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

312.30





**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6158 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BOFINGER, BARBARA, , ,**

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINTState  
NYZip Code  
11778Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C** 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 48.93☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BOFINGER, BARBARA, , ,**

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINTState  
NYZip Code  
11778Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C** 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 48.93☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BOFINGER, BARBARA, , ,**

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINTState  
NYZip Code  
11778Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C** 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 48.93☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 146.79

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6159 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BOFINGER, BARBARA, , ,**

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINTState  
NYZip Code  
11778Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

48.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BOFINGER, BARBARA, , ,**

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINTState  
NYZip Code  
11778Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BOFINGER, BARBARA, , ,**

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINTState  
NYZip Code  
11778Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.81

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6160 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BOFINGER, BARBARA, , ,**

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINTState  
NYZip Code  
11778Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BOFINGER, BARBARA, , ,**

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINTState  
NYZip Code  
11778Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BOFINGER, BARBARA, , ,**

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINTState  
NYZip Code  
11778Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.32

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6161 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BOFINGER, BARBARA, , ,**

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINTState  
NYZip Code  
11778Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BOSWELL, WARREN, , ,**

Mailing Address 232 ASHFORD CIRCLE

City  
DUNWOODYState  
GAZip Code  
30338Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BOSWELL, WARREN, , ,**

Mailing Address 232 ASHFORD CIRCLE

City  
DUNWOODYState  
GAZip Code  
30338Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1036.44

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6162 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BOSWELL, WARREN, , ,**

Mailing Address 232 ASHFORD CIRCLE

City  
DUNWOODYState  
GAZip Code  
30338Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BOWEN, S. , L. ,**

Mailing Address 443 PENDLETON SPRINGS RD.

City  
LYONSState  
GAZip Code  
30436Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BOWEN, S. , L. ,**

Mailing Address 443 PENDLETON SPRINGS RD.

City  
LYONSState  
GAZip Code  
30436Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

95.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

690.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6163 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. BOWEN, S. , L. ,

Mailing Address 443 PENDLETON SPRINGS RD.

City  
LYONSState  
GAZip Code  
30436Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BOYE, JACK, , ,

Mailing Address 357 LOCUST FENCE RD

City  
SAINT HELENA ISLANDState  
SCZip Code  
29920Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BOYE, JACK, , ,

Mailing Address 357 LOCUST FENCE RD

City  
SAINT HELENA ISLANDState  
SCZip Code  
29920Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

99.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

293.00
--------

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6164 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BOYE, JACK, , ,**

Mailing Address 357 LOCUST FENCE RD

City  
SAINT HELENA ISLANDState  
SCZip Code  
29920Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BRADLEY, RUSSELL, , ,**

Mailing Address 559 LAGUNA COURT

City  
OVIEDOState  
FLZip Code  
32765Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BRADLEY, RUSSELL, , ,**

Mailing Address 559 LAGUNA COURT

City  
OVIEDOState  
FLZip Code  
32765Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

307.20



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6165 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BRADLEY, RUSSELL, , ,**

Mailing Address 559 LAGUNA COURT

City  
OVIEDOState  
FLZip Code  
32765Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	62.46

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

270.66

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6166 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.65

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6167 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

125.74

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6168 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.32

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6169 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

31.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

31.23

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

98.90

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

PAGE 6170 OF 6441

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 01 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 01 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 01 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

30.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6171 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROTHERS, JUNE , SCOTT, ,**Mailing Address 5210 RIVER RD N  
APT 2027City  
KEIZERState  
ORZip Code  
97303Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651:

Amount of Each Disbursement this Period

20.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTZE , HARRY , W, , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651:

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROTZE , HARRY , W, , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651:

Amount of Each Disbursement this Period

44.65

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.12

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6172 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

75.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6173 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C** 

Transaction ID : SB28A-0.651:

Amount of Each Disbursement this Period

 20.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C** 

Transaction ID : SB28A-0.651:

Amount of Each Disbursement this Period

 20.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C** 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 20.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 60.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6174 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

20.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6175 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	14.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	14.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.50



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6177 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

	30.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6178 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

6.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

6.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

22.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6179 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

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Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6180 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00





**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6182 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	4.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROTZE , HARRY , W , , JR**

Mailing Address 18610 TUSCANY STONE 1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	3.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROWN, SHERRI, , ,**

Mailing Address 5834 E LEISURE LANE

City  
CAVE CREEKState  
AZZip Code  
85331Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

44.14

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6183 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROWN, SHERRI, , ,**

Mailing Address 5834 E LEISURE LANE

City  
CAVE CREEKState  
AZZip Code  
85331Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	1		2	0	2	5

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROWN, SHERRI, , ,**

Mailing Address 5834 E LEISURE LANE

City  
CAVE CREEKState  
AZZip Code  
85331Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	1		2	0	2	5

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROWN, SHERRI, , ,**

Mailing Address 5834 E LEISURE LANE

City  
CAVE CREEKState  
AZZip Code  
85331Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	1		2	0	2	5

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.32

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6184 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROWN, SHERRI, , ,**

Mailing Address 5834 E LEISURE LANE

City  
CAVE CREEKState  
AZZip Code  
85331Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROWN, SHERRI, , ,**

Mailing Address 5834 E LEISURE LANE

City  
CAVE CREEKState  
AZZip Code  
85331Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROWN, SHERRI, , ,**

Mailing Address 5834 E LEISURE LANE

City  
CAVE CREEKState  
AZZip Code  
85331Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	20.82

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.70

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6185 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROWN, SHERRI, , ,**

Mailing Address 5834 E LEISURE LANE

City  
CAVE CREEKState  
AZZip Code  
85331Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROWN, SHERRI, , ,**

Mailing Address 5834 E LEISURE LANE

City  
CAVE CREEKState  
AZZip Code  
85331Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROWN, SHERRI, , ,**

Mailing Address 5834 E LEISURE LANE

City  
CAVE CREEKState  
AZZip Code  
85331Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

109.32

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6186 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROWN, SHERRI, , ,**

Mailing Address 5834 E LEISURE LANE

City  
CAVE CREEKState  
AZZip Code  
85331Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROWN, SHERRI, , ,**

Mailing Address 5834 E LEISURE LANE

City  
CAVE CREEKState  
AZZip Code  
85331Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROWN, SHERRI, , ,**

Mailing Address 5834 E LEISURE LANE

City  
CAVE CREEKState  
AZZip Code  
85331Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.32

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	26	<input type="checkbox"/>	27
<input checked="" type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NRCC

A. BROWN, SHERRI, , ,

Date of Disbursement

M M / D D / Y Y Y Y  
02 11 2025

Purpose of Disbursement	CONTRIBUTION REFUND
-------------------------	---------------------

Candidate Name

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

FEC Identification Number

C

Transaction ID : SB28A-0.6511

36.44

 Memo Item

**B. BROWN, SHERRI, , ,**

Date of Disbursement

Purpose of Disbursement	CONTRIBUTION REFUND
-------------------------	---------------------

Candidate Name

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State:  District:

FEC Identification Number

C

**Transaction ID : SB28A-0.6513**  
Amount of Each Disbursement this Period

36.44

Memo Item

C. BROWN, SUZIE, , ,

Date of Disbursement

Purpose of Disbursement	CONTRIBUTION REFUND
-------------------------	---------------------

Candidate Name

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

FEC Identification Number

C

**Transaction ID : SB28A-0.651**  
Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....

172.88

**TOTAL** This Period (last page this line number only).....

[illegible]

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6188 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

	300.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6189 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.44

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6190 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2025

FEC Identification Number

C  
Transaction ID : SB28A-0.651  
Amount of Each Disbursement this Period

1.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROWN, SUZIE, , ,**

Mailing Address 607 OLD STEESE HIGHWAY, B340

City  
FAIRBANKSState  
AKZip Code  
99701Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2025

FEC Identification Number

C  
Transaction ID : SB28A-0.651  
Amount of Each Disbursement this Period

1.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BURGHER, DAVIS, , ,**

Mailing Address 519 W ARIEL AV

City  
FOLEYState  
ALZip Code  
36535Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

C  
Transaction ID : SB28A-0.651  
Amount of Each Disbursement this Period

104.10

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

106.18

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6191 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. BURGHER, DAVIS, , ,**

Mailing Address 519 W ARIEL AV

City  
FOLEYState  
ALZip Code  
36535Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

C	
<b>Transaction ID : SB28A-0.651:</b>	
Amount of Each Disbursement this Period	
	104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BURNS, WILLIAM, , ,**

Mailing Address PO BOX 13689

City  
FORT PIERCEState  
FLZip Code  
34979Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

C	
<b>Transaction ID : SB28A-0.651:</b>	
Amount of Each Disbursement this Period	
	75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BURNS, WILLIAM, , ,**

Mailing Address PO BOX 13689

City  
FORT PIERCEState  
FLZip Code  
34979Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

C	
<b>Transaction ID : SB28A-0.651</b>	
Amount of Each Disbursement this Period	
	75.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

254.10



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6193 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CASAS, RODLYNN, , ,**

Mailing Address 3165 COREY DR

City  
RENOState  
NVZip Code  
89509Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C** 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 100.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CASAS, RODLYNN, , ,**

Mailing Address 3165 COREY DR

City  
RENOState  
NVZip Code  
89509Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C** 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 100.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CASAS, RODLYNN, , ,**

Mailing Address 3165 COREY DR

City  
RENOState  
NVZip Code  
89509Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C** 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 100.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 300.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6194 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. CASE, NANCY , CHANCELLOR, ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

Mailing Address 24001 CINCO VILLAGE CENTER BLVD  
APT 1134City  
KATYState  
TXZip Code  
77494Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB28A-0.651:**

Amount of Each Disbursement this Period

49.50

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. CASE, NANCY , CHANCELLOR, ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

Mailing Address 24001 CINCO VILLAGE CENTER BLVD  
APT 1134City  
KATYState  
TXZip Code  
77494Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB28A-0.651:**

Amount of Each Disbursement this Period

49.50

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. CASE, NANCY , CHANCELLOR, ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

Mailing Address 24001 CINCO VILLAGE CENTER BLVD  
APT 1134City  
KATYState  
TXZip Code  
77494Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB28A-0.651:**

Amount of Each Disbursement this Period

49.50

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.50

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6195 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CASE, NANCY , CHANCELLOR, ,**Mailing Address 24001 CINCO VILLAGE CENTER BLVD  
APT 1134City  
KATYState  
TXZip Code  
77494Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CASE, NANCY , CHANCELLOR, ,**Mailing Address 24001 CINCO VILLAGE CENTER BLVD  
APT 1134City  
KATYState  
TXZip Code  
77494Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CASE, NANCY , CHANCELLOR, ,**Mailing Address 24001 CINCO VILLAGE CENTER BLVD  
APT 1134City  
KATYState  
TXZip Code  
77494Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.32

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6196 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CASE, NANCY , CHANCELLOR, ,**Mailing Address 24001 CINCO VILLAGE CENTER BLVD  
APT 1134City  
KATYState  
TXZip Code  
77494Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHRISTEN, JANET, , ,**

Mailing Address 13750 OLD DIXIE HWY

City  
SEBASTIANState  
FLZip Code  
32958Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHRISTEN, JANET, , ,**

Mailing Address 13750 OLD DIXIE HWY

City  
SEBASTIANState  
FLZip Code  
32958Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

244.64



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6197 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. CHRISTEN, JANET, , ,

Mailing Address 13750 OLD DIXIE HWY

City  
SEBASTIANState  
FLZip Code  
32958Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHRISTEN, JANET, , ,

Mailing Address 13750 OLD DIXIE HWY

City  
SEBASTIANState  
FLZip Code  
32958Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHRISTEN, JANET, , ,

Mailing Address 13750 OLD DIXIE HWY

City  
SEBASTIANState  
FLZip Code  
32958Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

286.28

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6198 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. CHRISTEN, JANET, , ,

Mailing Address 13750 OLD DIXIE HWY

City  
SEBASTIANState  
FLZip Code  
32958Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHRISTEN, JANET, , ,

Mailing Address 13750 OLD DIXIE HWY

City  
SEBASTIANState  
FLZip Code  
32958Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHRISTEN, JANET, , ,

Mailing Address 13750 OLD DIXIE HWY

City  
SEBASTIANState  
FLZip Code  
32958Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

231.16

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6199 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. **CHRISTEN, JANET, , ,**

Mailing Address 13750 OLD DIXIE HWY

City  
SEBASTIANState  
FLZip Code  
32958Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

C 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 44.65☐ Memo Item

Full Name (Last, First, Middle Initial)

B. **CHRISTEN, JANET, , ,**

Mailing Address 13750 OLD DIXIE HWY

City  
SEBASTIANState  
FLZip Code  
32958Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

C 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 75.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. **CHRISTEN, JANET, , ,**

Mailing Address 13750 OLD DIXIE HWY

City  
SEBASTIANState  
FLZip Code  
32958Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

C 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 44.65☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

 164.30

	21b		22		23		26		27
X	28a		28b		28c		29		30b

NRCC

A. CHRISTEN, JANET, , ,

**C**

**Transaction ID : SB28A-0.651:**  
Amount of Each Disbursement this Period

 Memo Item

**B. CHRISTEN, JANET, , ,**

**C**

**Transaction ID : SB28A-0.6513**

Amount of Each Disbursement this Period

Memo Item

C. CHRISTEN, JANET, , ,

**C**

**Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

Memo Item

193.40

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6201 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. **CHRISTEN, JANET, , ,**

Mailing Address 13750 OLD DIXIE HWY

City  
SEBASTIANState  
FLZip Code  
32958Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

C 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 75.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. **CHRISTEN, JANET, , ,**

Mailing Address 13750 OLD DIXIE HWY

City  
SEBASTIANState  
FLZip Code  
32958Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

C 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 44.65☐ Memo Item

Full Name (Last, First, Middle Initial)

C. **CHRISTEN, JANET, , ,**

Mailing Address 13750 OLD DIXIE HWY

City  
SEBASTIANState  
FLZip Code  
32958Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

C 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 44.65☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

 164.30

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6202 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CHURCH, STEVE, , ,**

Mailing Address 2213 WEST MAPLE AVENUE

City  
ENIDState  
OKZip Code  
73703Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHURCH, STEVE, , ,**

Mailing Address 2213 WEST MAPLE AVENUE

City  
ENIDState  
OKZip Code  
73703Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHURCH, STEVE, , ,**

Mailing Address 2213 WEST MAPLE AVENUE

City  
ENIDState  
OKZip Code  
73703Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

	300.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6203 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CLEMONS, TOM, , ,**

Mailing Address 305 ROLLING GREEN DR

City  
LAKEWAYState  
TXZip Code  
78734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	990.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. COGDELL, DABNEY, , ,**

Mailing Address 2002 DEER SPRINGS DR

City  
KINGWOODState  
TXZip Code  
77339Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. COGDELL, DABNEY, , ,**

Mailing Address 2002 DEER SPRINGS DR

City  
KINGWOODState  
TXZip Code  
77339Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

C	
Transaction ID : SB28A-0.651	
Amount of Each Disbursement this Period	
	104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1198.20

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6204 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. COHEN, ALBERT, , ,**

Mailing Address 960 SEASAGE DR

City  
DELRAY BEACHState  
FLZip Code  
33483Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

380.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CRAWLEY, JEAN, , ,**

Mailing Address 7920 TURNBERRY LN

City  
STANLEYState  
NCZip Code  
28164Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CRAWLEY, JEAN, , ,**

Mailing Address 7920 TURNBERRY LN

City  
STANLEYState  
NCZip Code  
28164Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

95.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

570.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6205 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CRAWLEY, JEAN, , ,**

Mailing Address 7920 TURNBERRY LN

City  
STANLEYState  
NCZip Code  
28164Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CRAWLEY, JEAN, , ,**

Mailing Address 7920 TURNBERRY LN

City  
STANLEYState  
NCZip Code  
28164Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CRAWLEY, JEAN, , ,**

Mailing Address 7920 TURNBERRY LN

City  
STANLEYState  
NCZip Code  
28164Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

95.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

285.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6206 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CRAWLEY, JEAN, , ,**

Mailing Address 7920 TURNBERRY LN

City  
STANLEYState  
NCZip Code  
28164Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CRIST, JACK, , ,**

Mailing Address 1944 UNIVERSITY PARK DR

City  
SACRAMENTOState  
CAZip Code  
95825Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CRIST, JACK, , ,**

Mailing Address 1944 UNIVERSITY PARK DR

City  
SACRAMENTOState  
CAZip Code  
95825Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

99.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

293.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6207 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CRIST, JACK, , ,**

Mailing Address 1944 UNIVERSITY PARK DR

City  
SACRAMENTOState  
CAZip Code  
95825Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CRIST, JACK, , ,**

Mailing Address 1944 UNIVERSITY PARK DR

City  
SACRAMENTOState  
CAZip Code  
95825Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CROSTHWAITE, DENNIS, , ,**

Mailing Address 646 S. LA BELLOTA

City  
GREEN VALLEYState  
AZZip Code  
85614Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.10

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6208 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CROSTHWAITE, DENNIS, , ,**

Mailing Address 646 S. LA BELLOTA

City  
GREEN VALLEYState  
AZZip Code  
85614Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CROSTHWAITE, DENNIS, , ,**

Mailing Address 646 S. LA BELLOTA

City  
GREEN VALLEYState  
AZZip Code  
85614Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CURTIS, JOANNE, , ,**

Mailing Address 7451 W FOOTHILL DR

City  
GLENDALEState  
AZZip Code  
85310Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

109.31

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

317.51

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6209 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CURTIS, JOANNE, , ,**

Mailing Address 7451 W FOOTHILL DR

City  
GLENDALEState  
AZZip Code  
85310Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

21.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CURTIS, JOANNE, , ,**

Mailing Address 7451 W FOOTHILL DR

City  
GLENDALEState  
AZZip Code  
85310Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

21.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CURTIS, JOANNE, , ,**

Mailing Address 7451 W FOOTHILL DR

City  
GLENDALEState  
AZZip Code  
85310Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

20.82

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.96

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6210 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CURTIS, JOANNE, , ,**

Mailing Address 7451 W FOOTHILL DR

City  
GLENDALEState  
AZZip Code  
85310Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

20.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CURTIS, JOANNE, , ,**

Mailing Address 7451 W FOOTHILL DR

City  
GLENDALEState  
AZZip Code  
85310Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

20.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CURTIS, JOANNE, , ,**

Mailing Address 7451 W FOOTHILL DR

City  
GLENDALEState  
AZZip Code  
85310Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

20.24

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61.88

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6211 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. CURTIS, JOANNE, , ,**

Mailing Address 7451 W FOOTHILL DR

City  
GLENDALEState  
AZZip Code  
85310Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

10.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DANIEL, MARIE, , ,**

Mailing Address 2357 ARENDELL WAY

City  
TALLAHASSEEState  
FLZip Code  
32308Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DANIEL, MARIE, , ,**

Mailing Address 2357 ARENDELL WAY

City  
TALLAHASSEEState  
FLZip Code  
32308Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.57

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6212 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DANIEL, MARIE, , ,**

Mailing Address 2357 ARENDELL WAY

City  
TALLAHASSEEState  
FLZip Code  
32308Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

C
---

  
**Transaction ID : SB28A-0.6514**  
Amount of Each Disbursement this Period  

78.08
-------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DAY, REBECCA, , ,**

Mailing Address 9312 OWENSBORO RD

City  
FALLS ROUGHState  
KYZip Code  
40119Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

C
---

  
**Transaction ID : SB28A-0.6514**  
Amount of Each Disbursement this Period  

52.05
-------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAY, REBECCA, , ,**

Mailing Address 9312 OWENSBORO RD

City  
FALLS ROUGHState  
KYZip Code  
40119Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

C
---

  
**Transaction ID : SB28A-0.651**  
Amount of Each Disbursement this Period  

52.05
-------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.18



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6213 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DAY, REBECCA, , ,**

Mailing Address 9312 OWENSBORO RD

City  
FALLS ROUGHState  
KYZip Code  
40119Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DAY, REBECCA, , ,**

Mailing Address 9312 OWENSBORO RD

City  
FALLS ROUGHState  
KYZip Code  
40119Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAY, REBECCA, , ,**

Mailing Address 9312 OWENSBORO RD

City  
FALLS ROUGHState  
KYZip Code  
40119Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

52.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.15

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6214 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DIBELLA, MONICA, , ,**

Mailing Address 15220 PORTSIDE DRIVE

City  
FORT MYERSState  
FLZip Code  
33908Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DIBELLA, MONICA, , ,**

Mailing Address 15220 PORTSIDE DRIVE

City  
FORT MYERSState  
FLZip Code  
33908Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DIBELLA, MONICA, , ,**

Mailing Address 15220 PORTSIDE DRIVE

City  
FORT MYERSState  
FLZip Code  
33908Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

75.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6215 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DIBELLA, MONICA, , ,**

Mailing Address 15220 PORTSIDE DRIVE

City  
FORT MYERSState  
FLZip Code  
33908Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DIBELLA, MONICA, , ,**

Mailing Address 15220 PORTSIDE DRIVE

City  
FORT MYERSState  
FLZip Code  
33908Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DIBELLA, MONICA, , ,**

Mailing Address 15220 PORTSIDE DRIVE

City  
FORT MYERSState  
FLZip Code  
33908Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

52.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

179.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6216 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DIBELLA, MONICA, , ,**

Mailing Address 15220 PORTSIDE DRIVE

City  
FORT MYERSState  
FLZip Code  
33908Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DIBELLA, MONICA, , ,**

Mailing Address 15220 PORTSIDE DRIVE

City  
FORT MYERSState  
FLZip Code  
33908Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DIBELLA, MONICA, , ,**

Mailing Address 15220 PORTSIDE DRIVE

City  
FORT MYERSState  
FLZip Code  
33908Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.44

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6217 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DIBELLA, MONICA, , ,**

Mailing Address 15220 PORTSIDE DRIVE

City  
FORT MYERSState  
FLZip Code  
33908Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DIBELLA, MONICA, , ,**

Mailing Address 15220 PORTSIDE DRIVE

City  
FORT MYERSState  
FLZip Code  
33908Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DIBELLA, MONICA, , ,**

Mailing Address 15220 PORTSIDE DRIVE

City  
FORT MYERSState  
FLZip Code  
33908Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

9.37

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

29.37

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6218 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DIBELLA, MONICA, , ,**

Mailing Address 15220 PORTSIDE DRIVE

City  
FORT MYERSState  
FLZip Code  
33908Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

9.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DICKSON, RON, , ,**

Mailing Address 204 SHEARWATER ISLE

City  
SAN MATEOState  
CAZip Code  
94404Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DICKSON, RON, , ,**

Mailing Address 204 SHEARWATER ISLE

City  
SAN MATEOState  
CAZip Code  
94404Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

52.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6219 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DICKSON, RON, , ,**

Mailing Address 204 SHEARWATER ISLE

City  
SAN MATEOState  
CAZip Code  
94404Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DICKSON, RON, , ,**

Mailing Address 204 SHEARWATER ISLE

City  
SAN MATEOState  
CAZip Code  
94404Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DOLLE, BILL, , ,**

Mailing Address 4039 16TH ST

City  
LUBBOCKState  
TXZip Code  
79416Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6220 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DOLLE, BILL, , ,**

Mailing Address 4039 16TH ST

City  
LUBBOCKState  
TXZip Code  
79416Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DOLLE, BILL, , ,**

Mailing Address 4039 16TH ST

City  
LUBBOCKState  
TXZip Code  
79416Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DOLLE, BILL, , ,**

Mailing Address 4039 16TH ST

City  
LUBBOCKState  
TXZip Code  
79416Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

34.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.65



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6221 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DOLLE, BILL, , ,**

Mailing Address 4039 16TH ST

City  
LUBBOCKState  
TXZip Code  
79416Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

34.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DOLLE, BILL, , ,**

Mailing Address 4039 16TH ST

City  
LUBBOCKState  
TXZip Code  
79416Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DOLLE, BILL, , ,**

Mailing Address 4039 16TH ST

City  
LUBBOCKState  
TXZip Code  
79416Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

20.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.65

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6222 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DOLLE, BILL, , ,**

Mailing Address 4039 16TH ST

City  
LUBBOCKState  
TXZip Code  
79416Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DUKES, GEORGE, , ,**

Mailing Address 10518 ARNOLD PALMER DRIVE

City  
RALEIGHState  
NCZip Code  
27617Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DUKES, GEORGE, , ,**

Mailing Address 10518 ARNOLD PALMER DRIVE

City  
RALEIGHState  
NCZip Code  
27617Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

71.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

162.50

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6223 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DUKES, GEORGE, , ,**

Mailing Address 10518 ARNOLD PALMER DRIVE

City  
RALEIGHState  
NCZip Code  
27617Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DUNHAM, VICTORIA, , ,**

Mailing Address PO BOX 517

City  
RIDGEFIELDState  
WAZip Code  
98642Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DUNHAM, VICTORIA, , ,**

Mailing Address PO BOX 517

City  
RIDGEFIELDState  
WAZip Code  
98642Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

271.25

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6224 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DUNHAM, VICTORIA, , ,**

Mailing Address PO BOX 517

City  
RIDGEFIELDState  
WAZip Code  
98642Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DUNHAM, VICTORIA, , ,**

Mailing Address PO BOX 517

City  
RIDGEFIELDState  
WAZip Code  
98642Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DUNHAM, VICTORIA, , ,**

Mailing Address PO BOX 517

City  
RIDGEFIELDState  
WAZip Code  
98642Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

99.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

298.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6225 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. EISENMENGER, CHERYL, , ,**

Mailing Address 4501 THORNBURY DR W

City  
VALPARAISOState  
INZip Code  
46383Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EISENMENGER, CHERYL, , ,**

Mailing Address 4501 THORNBURY DR W

City  
VALPARAISOState  
INZip Code  
46383Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EISENMENGER, CHERYL, , ,**

Mailing Address 4501 THORNBURY DR W

City  
VALPARAISOState  
INZip Code  
46383Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

78.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

234.24

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6226 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. EPPS, JAMES, , ,**

Mailing Address 16001 KEVINDALE CT

City  
HOUSTONState  
TXZip Code  
77040Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EPPS, JAMES, , ,**

Mailing Address 16001 KEVINDALE CT

City  
HOUSTONState  
TXZip Code  
77040Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EPPS, JAMES, , ,**

Mailing Address 16001 KEVINDALE CT

City  
HOUSTONState  
TXZip Code  
77040Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6227 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. EPPS, JAMES, , ,**

Mailing Address 16001 KEVINDALE CT

City  
HOUSTONState  
TXZip Code  
77040Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EPPS, JAMES, , ,**

Mailing Address 16001 KEVINDALE CT

City  
HOUSTONState  
TXZip Code  
77040Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EPPS, JAMES, , ,**

Mailing Address 16001 KEVINDALE CT

City  
HOUSTONState  
TXZip Code  
77040Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.30

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6228 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. EPPS, JAMES, , ,**

Mailing Address 16001 KEVINDALE CT

City  
HOUSTONState  
TXZip Code  
77040Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FENELL, KENNETH, , ,**

Mailing Address 11 STEELE LN

City  
EUREKAState  
CAZip Code  
95503Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FENELL, KENNETH, , ,**

Mailing Address 11 STEELE LN

City  
EUREKAState  
CAZip Code  
95503Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

194.65



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6229 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. FENELL, KENNETH, , ,**

Mailing Address 11 STEELE LN

City  
EUREKAState  
CAZip Code  
95503Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FENELL, KENNETH, , ,**

Mailing Address 11 STEELE LN

City  
EUREKAState  
CAZip Code  
95503Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6230 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

75.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6231 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

C

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

57.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

C

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

57.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

158.65

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6232 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.95

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6233 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

44.18

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.18

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6234 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

18.80

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.80

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6235 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

25.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6236 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.65



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6237 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

34.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

9.40

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.39

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6238 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. FINE, BARBARA, , ,**

Mailing Address 67 TOLLAND RD

City  
BRISTOLState  
CTZip Code  
06010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

237.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FORCE, MICHAEL , , ,**

Mailing Address 3311 MARSHVIEW DR

City  
SUPPLYState  
NCZip Code  
28462Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

62.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FORCE, MICHAEL , , ,**

Mailing Address 3311 MARSHVIEW DR

City  
SUPPLYState  
NCZip Code  
28462Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

62.46

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

362.42

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6239 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. FORCE, MICHAEL , , ,**

Mailing Address 3311 MARSHVIEW DR

City  
SUPPLYState  
NCZip Code  
28462Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

29.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FORCE, MICHAEL , , ,**

Mailing Address 3311 MARSHVIEW DR

City  
SUPPLYState  
NCZip Code  
28462Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

29.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FORCE, MICHAEL , , ,**

Mailing Address 3311 MARSHVIEW DR

City  
SUPPLYState  
NCZip Code  
28462Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

29.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6240 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. FORCE, MICHAEL , , ,**

Mailing Address 3311 MARSHVIEW DR

City  
SUPPLYState  
NCZip Code  
28462Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

20.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FORCE, MICHAEL , , ,**

Mailing Address 3311 MARSHVIEW DR

City  
SUPPLYState  
NCZip Code  
28462Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

20.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FORCE, MICHAEL , , ,**

Mailing Address 3311 MARSHVIEW DR

City  
SUPPLYState  
NCZip Code  
28462Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

20.24

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.72



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6242 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. FRIBERG, THOMAS, , ,**

Mailing Address 122 SAINT CHARLES CT

City  
PITTSBURGHState  
PAZip Code  
15238Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIBERG, THOMAS, , ,**

Mailing Address 122 SAINT CHARLES CT

City  
PITTSBURGHState  
PAZip Code  
15238Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIBERG, THOMAS, , ,**

Mailing Address 122 SAINT CHARLES CT

City  
PITTSBURGHState  
PAZip Code  
15238Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6243 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GARBACZ, ROBERT, , ,**

Mailing Address 3509 GLENWOOD

City  
WICHITA FALLSState  
TXZip Code  
76308Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GARBACZ, ROBERT, , ,**

Mailing Address 3509 GLENWOOD

City  
WICHITA FALLSState  
TXZip Code  
76308Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GARBACZ, ROBERT, , ,**

Mailing Address 3509 GLENWOOD

City  
WICHITA FALLSState  
TXZip Code  
76308Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6244 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GARBACZ, ROBERT, , ,**

Mailing Address 3509 GLENWOOD

City  
WICHITA FALLSState  
TXZip Code  
76308Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GARBACZ, ROBERT, , ,**

Mailing Address 3509 GLENWOOD

City  
WICHITA FALLSState  
TXZip Code  
76308Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GEYER, LINDA, , ,**

Mailing Address 218 LEISIE RD

City  
RENFREWState  
PAZip Code  
16053Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

124.92

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

224.92



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6245 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GEYER, LINDA, , ,**

Mailing Address 218 LEISIE RD

City  
RENFREWState  
PAZip Code  
16053Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

124.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GEYER, LINDA, , ,**

Mailing Address 218 LEISIE RD

City  
RENFREWState  
PAZip Code  
16053Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

15.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GEYER, LINDA, , ,**

Mailing Address 218 LEISIE RD

City  
RENFREWState  
PAZip Code  
16053Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

15.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.54

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6246 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GEYER, LINDA, , ,**

Mailing Address 218 LEISIE RD

City  
RENFREWState  
PAZip Code  
16053Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GIBILISCO, PAUL, , ,**

Mailing Address 309 HAIN AVE.

City  
READINGState  
PAZip Code  
19605Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GIBILISCO, PAUL, , ,**

Mailing Address 309 HAIN AVE.

City  
READINGState  
PAZip Code  
19605Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

52.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6247 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GIBILISCO, PAUL, , ,**

Mailing Address 309 HAIN AVE.

City  
READINGState  
PAZip Code  
19605Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GIBILISCO, PAUL, , ,**

Mailing Address 309 HAIN AVE.

City  
READINGState  
PAZip Code  
19605Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GIBILISCO, PAUL, , ,**

Mailing Address 309 HAIN AVE.

City  
READINGState  
PAZip Code  
19605Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

52.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.15

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6248 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GLENZ, DONALD, , ,**

Mailing Address 28422 JONSPORT LN

City  
SPRINGState  
TXZip Code  
77386Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C** **Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

 78.08☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GLENZ, DONALD, , ,**

Mailing Address 28422 JONSPORT LN

City  
SPRINGState  
TXZip Code  
77386Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C** **Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

 50.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GLENZ, DONALD, , ,**

Mailing Address 28422 JONSPORT LN

City  
SPRINGState  
TXZip Code  
77386Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C** **Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

 50.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 178.08

	21b		22		23		26		27
X	28a		28b		28c		29		30b

NRCC

A. GLENZ, DONALD, , ,

C	
---	--

Category/  
Type

34.65

Memo Item

**B. GLENZ, DONALD, , ,**

A diagram of a three-part barcode. The first part has two 'M' labels above the bars and the value '02' below. The second part has two 'D' labels above the bars and the value '05' below. The third part has four 'Y' labels above the bars and the value '2025' below. The parts are separated by slashes.

--	--	--	--

C

Category/  
Type

25.00

Memo Item

C. GLENZ, DONALD, , ,

--	--	--	--

[illegible]Category/  
Type

20.00

Memo Item

79.65

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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6250 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GLENZ, DONALD, , ,**

Mailing Address 28422 JONSPORT LN

City  
SPRINGState  
TXZip Code  
77386Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GLENZ, DONALD, , ,**

Mailing Address 28422 JONSPORT LN

City  
SPRINGState  
TXZip Code  
77386Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

9.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GOMEZ, KATHLEEN, , ,**

Mailing Address 3708 CORINNE AVE

City  
CHALMETTEState  
LAZip Code  
70043Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.34

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6251 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GOMEZ, KATHLEEN, , ,**

Mailing Address 3708 CORINNE AVE

City  
CHALMETTEState  
LAZip Code  
70043Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GOMEZ, KATHLEEN, , ,**

Mailing Address 3708 CORINNE AVE

City  
CHALMETTEState  
LAZip Code  
70043Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

14.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GOMEZ, KATHLEEN, , ,**

Mailing Address 3708 CORINNE AVE

City  
CHALMETTEState  
LAZip Code  
70043Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

14.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64.94

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6252 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GOMEZ, KATHLEEN, , ,**

Mailing Address 3708 CORINNE AVE

City  
CHALMETTEState  
LAZip Code  
70043Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

14.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GOMEZ, KATHLEEN, , ,**

Mailing Address 3708 CORINNE AVE

City  
CHALMETTEState  
LAZip Code  
70043Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

14.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GOMEZ, KATHLEEN, , ,**

Mailing Address 3708 CORINNE AVE

City  
CHALMETTEState  
LAZip Code  
70043Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

14.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

42.75



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6253 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GOMEZ, KATHLEEN, , ,**

Mailing Address 3708 CORINNE AVE

City  
CHALMETTEState  
LAZip Code  
70043Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

14.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GOMEZ, KATHLEEN, , ,**

Mailing Address 3708 CORINNE AVE

City  
CHALMETTEState  
LAZip Code  
70043Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GOMEZ, KATHLEEN, , ,**

Mailing Address 3708 CORINNE AVE

City  
CHALMETTEState  
LAZip Code  
70043Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

3.12

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27.37

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6254 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GOMEZ, KATHLEEN, , ,**

Mailing Address 3708 CORINNE AVE

City  
CHALMETTEState  
LAZip Code  
70043Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

3.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GOMEZ, KATHLEEN, , ,**

Mailing Address 3708 CORINNE AVE

City  
CHALMETTEState  
LAZip Code  
70043Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

10.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GOMEZ, KATHLEEN, , ,**

Mailing Address 3708 CORINNE AVE

City  
CHALMETTEState  
LAZip Code  
70043Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

14.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27.78

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6255 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GOMEZ, KATHLEEN, , ,**

Mailing Address 3708 CORINNE AVE

City  
CHALMETTEState  
LAZip Code  
70043Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

14.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GOMEZ, KATHLEEN, , ,**

Mailing Address 3708 CORINNE AVE

City  
CHALMETTEState  
LAZip Code  
70043Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

14.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GREENE, DONNA, , ,**

Mailing Address 22103 CHATSFORD CIRCUIT ST.

City  
SOUTHFIELDState  
MIZip Code  
48034Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

57.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.50

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6256 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GREENE, DONNA, , ,**

Mailing Address 22103 CHATSFORD CIRCUIT ST.

City  
SOUTHFIELDState  
MIZip Code  
48034Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

57.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GREENE, DONNA, , ,**

Mailing Address 22103 CHATSFORD CIRCUIT ST.

City  
SOUTHFIELDState  
MIZip Code  
48034Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

57.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GREENE, DONNA, , ,**

Mailing Address 22103 CHATSFORD CIRCUIT ST.

City  
SOUTHFIELDState  
MIZip Code  
48034Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

57.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6257 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

205.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6258 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

2.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

2.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

2.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6.24

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6259 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

1.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

1.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

1.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3.12

	21b		22		23		26		27
X	28a		28b		28c		29		30b

NRCC

A. GREICO, CATHY, , ,

C

Category/  
Type

1.04

Memo Item

**B. GREICO, CATHY, , ,**

M M / D D / Y Y Y Y  
02 25 2025

C

Category/  
Type

1.04

Memo Item

C. GREICO, CATHY, , ,

C

Category/  
Type

1.04

Memo Item

3.12



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6261 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

1.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

1.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

1.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3.12

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6262 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

1.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

1.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

1.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3.12

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6263 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NRCC

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City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

1.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

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Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

1.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

1.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3.12

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6264 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NRCC

Full Name (Last, First, Middle Initial)

**A. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

1.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

1.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

1.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3.12





	21b		22		23		26		27
X	28a		28b		28c		29		30b

NRCC

A. GREICO, CATHY, , ,

Date of Disbursement

FEC Identification Number

C

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

 Memo Item

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

**B. GREICO, CATHY, , ,**

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Transaction ID : SB28A-0.6515

Amount of Each Disbursement this Period

1.00

Memo Item

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) \_\_\_\_\_

State:  District:

C. GREICO, CATHY,...

Date of Disbursement

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

Year	Number of individuals
1990	1.00
1995	0.80
2000	1.00
2005	1.20
2010	0.80

 Memo Item

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

3.00

**TOTAL** This Period (last page this line number only).....

	21b		22		23		26		27
X	28a		28b		28c		29		30b

NRCC

A. GREICO, CATHY, , ,

Date of Disbursement

FEC Identification Number

C

Transaction ID : SB28A-0.6514

Amount of Each Disbursement this Period

 Memo Item

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**B. GREICO, CATHY, , ,**

Date of Disbursement

FEC Identification Number

C

Transaction ID : SB28A-0.6515

Amount of Each Disbursement this Period

1.00

Memo Item

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

C. GREICO, CATHY, , ,

Date of Disbursement

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

Memo Item

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional).....

3.00

**TOTAL** This Period (last page this line number only).....





**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6270 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

1.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

0.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

0.95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2.90

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6271 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

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**A. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

0.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

0.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

36.90

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6272 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GREICO, CATHY, , ,**

Mailing Address 3220 OLD YORKTOWN RD

City  
YORKTOWN HEIGHTSState  
NYZip Code  
10598Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6273 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. GUTHRIE, BART, , ,**

Mailing Address 1040 BISCAYNE BLVD

City  
MIAMIState  
FLZip Code  
33132Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

520.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRAH, TONY, , ,**

Mailing Address 1190 MILE CIRCLE

City  
RENOState  
NVZip Code  
89511Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRAH, TONY, , ,**

Mailing Address 1190 MILE CIRCLE

City  
RENOState  
NVZip Code  
89511Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

728.71

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6274 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. HARRAH, TONY, , ,**

Mailing Address 1190 MILE CIRCLE

City  
RENOState  
NVZip Code  
89511Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRAH, TONY, , ,**

Mailing Address 1190 MILE CIRCLE

City  
RENOState  
NVZip Code  
89511Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRAH, TONY, , ,**

Mailing Address 1190 MILE CIRCLE

City  
RENOState  
NVZip Code  
89511Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

308.20

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6275 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. HARRAH, TONY, , ,**

Mailing Address 1190 MILE CIRCLE

City  
RENOState  
NVZip Code  
89511

Purpose of Disbursement

CONTRIBUTION REFUND

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6511

Amount of Each Disbursement this Period

83.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRAH, TONY, , ,**

Mailing Address 1190 MILE CIRCLE

City  
RENOState  
NVZip Code  
89511

Purpose of Disbursement

CONTRIBUTION REFUND

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6511

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRAH, TONY, , ,**

Mailing Address 1190 MILE CIRCLE

City  
RENOState  
NVZip Code  
89511

Purpose of Disbursement

CONTRIBUTION REFUND

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6511

Amount of Each Disbursement this Period

78.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

239.44

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6276 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. HARRAH, TONY, , ,

Mailing Address 1190 MILE CIRCLE

City  
RENOState  
NVZip Code  
89511Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HARRINGTON, FESTUS, , ,

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HARRINGTON, FESTUS, , ,

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

48.93

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

162.01



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6277 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

48.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

41.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

41.64

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

132.21

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6278 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

41.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

41.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

39.60

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.88

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6279 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

39.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

39.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.64

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

PAGE 6280 OF 6441

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

52.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.49

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6281 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.32

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6282 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRINGTON, FESTUS, , ,**

Mailing Address 1697 HWY 42

City  
PETALState  
MSZip Code  
39465Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRIS, GARY, , ,**

Mailing Address 5902 BENT TREE CT

City  
HUMBLEState  
TXZip Code  
77346Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6283 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. HARRIS, GARY, , ,

Mailing Address 5902 BENT TREE CT

City  
HUMBLEState  
TXZip Code  
77346Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HAYS, GEORGE, , ,

Mailing Address PO BOX 142

City  
YACOLTState  
WAZip Code  
98675Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HAYS, GEORGE, , ,

Mailing Address PO BOX 142

City  
YACOLTState  
WAZip Code  
98675Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

226.83

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6284 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. HAYS, GEORGE, , ,**

Mailing Address PO BOX 142

City  
YACOLTState  
WAZip Code  
98675Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

47.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HAYS, GEORGE, , ,**

Mailing Address PO BOX 142

City  
YACOLTState  
WAZip Code  
98675Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HAYS, GEORGE, , ,**

Mailing Address PO BOX 142

City  
YACOLTState  
WAZip Code  
98675Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

20.82

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

112.47

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6285 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. HAYS, GEORGE, , ,**

Mailing Address PO BOX 142

City  
YACOLTState  
WAZip Code  
98675Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

20.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HAYS, GEORGE, , ,**

Mailing Address PO BOX 142

City  
YACOLTState  
WAZip Code  
98675Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HAYS, GEORGE, , ,**

Mailing Address PO BOX 142

City  
YACOLTState  
WAZip Code  
98675Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.21

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

31.24

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6286 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. HAYS, GEORGE, , ,**

Mailing Address PO BOX 142

City  
YACOLTState  
WAZip Code  
98675Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HAYS, GEORGE, , ,**

Mailing Address PO BOX 142

City  
YACOLTState  
WAZip Code  
98675Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

20.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HUNT, WILLIAM, , ,**Mailing Address 22218 5TH AVE S  
APT 301City  
DES MOINESState  
WAZip Code  
95195Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.90

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6287 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A.** HUNT, WILLIAM, , ,Mailing Address 22218 5TH AVE S  
APT 301City  
DES MOINESState  
WAZip Code  
95195Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** HUNT, WILLIAM, , ,Mailing Address 22218 5TH AVE S  
APT 301City  
DES MOINESState  
WAZip Code  
95195Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** HUNT, WILLIAM, , ,Mailing Address 22218 5TH AVE S  
APT 301City  
DES MOINESState  
WAZip Code  
95195Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6288 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A.** HUNT, WILLIAM, , ,Mailing Address 22218 5TH AVE S  
APT 301City  
DES MOINESState  
WAZip Code  
95195Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** HUNT, WILLIAM, , ,Mailing Address 22218 5TH AVE S  
APT 301City  
DES MOINESState  
WAZip Code  
95195Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** HUNT, WILLIAM, , ,Mailing Address 22218 5TH AVE S  
APT 301City  
DES MOINESState  
WAZip Code  
95195Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

20.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6289 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. HUNT, WILLIAM, , ,

Mailing Address 22218 5TH AVE S  
APT 301City  
DES MOINESState  
WAZip Code  
95195Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HUNT, WILLIAM, , ,

Mailing Address 22218 5TH AVE S  
APT 301City  
DES MOINESState  
WAZip Code  
95195Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HUTCHINSON, ROBERT, , ,

Mailing Address 37 WHIPOWILL BEND

City  
THOMASVILLEState  
GAZip Code  
31757Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6290 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. HUTCHINSON, ROBERT, , ,**

Mailing Address 37 WHIPOWILL BEND

City  
THOMASVILLEState  
GAZip Code  
31757Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HUTCHINSON, ROBERT, , ,**

Mailing Address 37 WHIPOWILL BEND

City  
THOMASVILLEState  
GAZip Code  
31757Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JAMES, JOHN, , ,**

Mailing Address 1721 BENJAMIN ROAD

City  
MADISONState  
OHZip Code  
44058Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

275.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6291 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. JAMES, JOHN, , ,

Mailing Address 1721 BENJAMIN ROAD

City  
MADISONState  
OHZip Code  
44058Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JAMES, JOHN, , ,

Mailing Address 1721 BENJAMIN ROAD

City  
MADISONState  
OHZip Code  
44058Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JENSEN, LARRY, , ,

Mailing Address 1034 BEAVER LAKE BLVD

City  
PLATTSMOUTHState  
NEZip Code  
68048Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6292 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. JENSEN, LARRY, , ,**

Mailing Address 1034 BEAVER LAKE BLVD

City  
PLATTSMOUTHState  
NEZip Code  
68048Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JENSEN, LARRY, , ,**

Mailing Address 1034 BEAVER LAKE BLVD

City  
PLATTSMOUTHState  
NEZip Code  
68048Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JENSEN, LARRY, , ,**

Mailing Address 1034 BEAVER LAKE BLVD

City  
PLATTSMOUTHState  
NEZip Code  
68048Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

47.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

222.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6293 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. JENSEN, LARRY, , ,**

Mailing Address 1034 BEAVER LAKE BLVD

City  
PLATTSMOUTHState  
NEZip Code  
68048Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C** 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 47.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JOHNSON, BRADLEY, R, ,**

Mailing Address 368 HUDSON STREET

City  
PAYNESVILLEState  
MNZip Code  
56362Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

FEC Identification Number

**C** 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 100.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JOHNSON, BRADLEY, R, ,**

Mailing Address 368 HUDSON STREET

City  
PAYNESVILLEState  
MNZip Code  
56362Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

FEC Identification Number

**C** 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 100.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 247.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6294 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. JOHNSON, BRADLEY , R, ,

Mailing Address 368 HUDSON STREET

City  
PAYNESVILLEState  
MNZip Code  
56362Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KIM, PETER, , ,

Mailing Address 220 S. OLIVE ST.  
APT B 420City  
LOS ANGELESState  
CAZip Code  
90012Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KIM, PETER, , ,

Mailing Address 220 S. OLIVE ST.  
APT B 420City  
LOS ANGELESState  
CAZip Code  
90012Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

184.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6295 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. KIM, PETER, , ,

Mailing Address 220 S. OLIVE ST.  
APT B 420City  
LOS ANGELESState  
CAZip Code  
90012Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KIM, PETER, , ,

Mailing Address 220 S. OLIVE ST.  
APT B 420City  
LOS ANGELESState  
CAZip Code  
90012Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KING, DAVID, , ,

Mailing Address 27 LUDDINGTON ROAD

City  
WEST ORANGEState  
NJZip Code  
07052Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

95.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

191.70

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6296 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. KING, DAVID, , ,

Mailing Address 27 LUDDINGTON ROAD

City  
WEST ORANGEState  
NJZip Code  
07052Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KING, DAVID, , ,

Mailing Address 27 LUDDINGTON ROAD

City  
WEST ORANGEState  
NJZip Code  
07052Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KING, DAVID, , ,

Mailing Address 27 LUDDINGTON ROAD

City  
WEST ORANGEState  
NJZip Code  
07052Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

95.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

285.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6297 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. KING, GLENDA, , ,**

Mailing Address 4121 SOUTH 17TH STREET

City  
FORT SMITHState  
ARZip Code  
72901Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KING, GLENDA, , ,**

Mailing Address 4121 SOUTH 17TH STREET

City  
FORT SMITHState  
ARZip Code  
72901Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KING, GLENDA, , ,**

Mailing Address 4121 SOUTH 17TH STREET

City  
FORT SMITHState  
ARZip Code  
72901Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

71.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.75

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6298 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. KING, JAMES, , ,

Mailing Address 6607 WOODLAND CIRCLE

City  
FORT SMITHState  
ARZip Code  
72916Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KING, JAMES, , ,

Mailing Address 6607 WOODLAND CIRCLE

City  
FORT SMITHState  
ARZip Code  
72916Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KING, JAMES, , ,

Mailing Address 6607 WOODLAND CIRCLE

City  
FORT SMITHState  
ARZip Code  
72916Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

34.65

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

107.53

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6299 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. KING, JAMES, , ,

Mailing Address 6607 WOODLAND CIRCLE

City  
FORT SMITHState  
ARZip Code  
72916Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

34.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KING, JAMES, , ,

Mailing Address 6607 WOODLAND CIRCLE

City  
FORT SMITHState  
ARZip Code  
72916Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

34.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KING, JAMES, , ,

Mailing Address 6607 WOODLAND CIRCLE

City  
FORT SMITHState  
ARZip Code  
72916Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

34.30

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

103.25

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6300 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. KING, MCTONY, , ,**

Mailing Address 4882 ADAMS CHAPEL RD

City  
DEARINGState  
GAZip Code  
30808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KING, MCTONY, , ,**

Mailing Address 4882 ADAMS CHAPEL RD

City  
DEARINGState  
GAZip Code  
30808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KNIGHT, MICHELE, , ,**Mailing Address 8951 BONITA BEACH RD  
STE 525City  
BONITA SPRINGSState  
FLZip Code  
34135Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

312.30



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6301 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. KNIGHT, MICHELE, , ,**Mailing Address 8951 BONITA BEACH RD  
STE 525City  
BONITA SPRINGSState  
FLZip Code  
34135Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 04 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KNIGHT, MICHELE, , ,**Mailing Address 8951 BONITA BEACH RD  
STE 525City  
BONITA SPRINGSState  
FLZip Code  
34135Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 04 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KNIGHT, MICHELE, , ,**Mailing Address 8951 BONITA BEACH RD  
STE 525City  
BONITA SPRINGSState  
FLZip Code  
34135Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 04 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

312.30

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6302 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. KNIGHT, MICHELE, , ,

Mailing Address 8951 BONITA BEACH RD  
STE 525City  
BONITA SPRINGSState  
FLZip Code  
34135Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 04 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

33.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KNIGHT, MICHELE, , ,

Mailing Address 8951 BONITA BEACH RD  
STE 525City  
BONITA SPRINGSState  
FLZip Code  
34135Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 04 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

33.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KNIGHT, MICHELE, , ,

Mailing Address 8951 BONITA BEACH RD  
STE 525City  
BONITA SPRINGSState  
FLZip Code  
34135Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 04 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

33.25

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

99.75

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6303 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. KOENIG, WALTER, , ,

Mailing Address PO BOX 1041

City  
WOODBIDGEState  
CAZip Code  
95258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KOENIG, WALTER, , ,

Mailing Address PO BOX 1041

City  
WOODBIDGEState  
CAZip Code  
95258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KOENIG, WALTER, , ,

Mailing Address PO BOX 1041

City  
WOODBIDGEState  
CAZip Code  
95258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

99.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

297.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6304 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. KOTZUR, RICHARD, , ,**

Mailing Address 29505 N. FM 681

City  
EDINBURGState  
TXZip Code  
78541Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

1041.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LAILE, TROY, , ,**

Mailing Address 10041 INDIAN HILL DRIVE

City  
UNIONState  
KYZip Code  
41091Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

156.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LAILE, TROY, , ,**

Mailing Address 10041 INDIAN HILL DRIVE

City  
UNIONState  
KYZip Code  
41091Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

156.15

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1353.32

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6305 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. LAILE, TROY, , ,

Mailing Address 10041 INDIAN HILL DRIVE

City  
UNIONState  
KYZip Code  
41091Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

C Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

156.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LATTIMORE, RALPH, , ,

Mailing Address 105 HUNTERS RUN

City  
GREENVILLEState  
SCZip Code  
29615Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

C Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LATTIMORE, RALPH, , ,

Mailing Address 105 HUNTERS RUN

City  
GREENVILLEState  
SCZip Code  
29615Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

C Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

356.15

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6306 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. LATTIMORE, RALPH, , ,**

Mailing Address 105 HUNTERS RUN

City  
GREENVILLEState  
SCZip Code  
29615Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C** 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 100.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LEE, MELISSA, , ,**

Mailing Address 3298 21ST PL SW

City  
LARGOState  
FLZip Code  
33774Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C** 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 71.25☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LEE, MELISSA, , ,**

Mailing Address 3298 21ST PL SW

City  
LARGOState  
FLZip Code  
33774Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C** 

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

 71.25☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 242.50

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6307 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A.** LEE, MELISSA, , ,

Mailing Address 3298 21ST PL SW

City  
LARGOState  
FLZip Code  
33774Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** LEED, BURTON, , ,

Mailing Address 77 HIGHVIEW AVE

City  
BERNARDSVILLEState  
NJZip Code  
07924Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** LEED, BURTON, , ,

Mailing Address 77 HIGHVIEW AVE

City  
BERNARDSVILLEState  
NJZip Code  
07924Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

221.25

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6308 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. LEED, BURTON, , ,**

Mailing Address 77 HIGHVIEW AVE

City  
BERNARDSVILLEState  
NJZip Code  
07924Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LEED, BURTON, , ,**

Mailing Address 77 HIGHVIEW AVE

City  
BERNARDSVILLEState  
NJZip Code  
07924Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LEED, BURTON, , ,**

Mailing Address 77 HIGHVIEW AVE

City  
BERNARDSVILLEState  
NJZip Code  
07924Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

40.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.00
--------



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6309 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. LEED, BURTON, , ,**

Mailing Address 77 HIGHVIEW AVE

City  
BERNARDSVILLEState  
NJZip Code  
07924Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LEEST, ARLAND, , ,**

Mailing Address 403 2ND ST

City  
SULLYState  
IAZip Code  
50251Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

483.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LEEST, ARLAND, , ,**

Mailing Address 403 2ND ST

City  
SULLYState  
IAZip Code  
50251Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

209.22

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

767.92

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6310 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. LEMORANDE, THOMAS, , ,**

Mailing Address 1809 BEETHOVEN

City  
GREEN BAYState  
WIZip Code  
54311Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LEMORANDE, THOMAS, , ,**

Mailing Address 1809 BEETHOVEN

City  
GREEN BAYState  
WIZip Code  
54311Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LEMORANDE, THOMAS, , ,**

Mailing Address 1809 BEETHOVEN

City  
GREEN BAYState  
WIZip Code  
54311Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

234.24

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6311 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. LINDBERG, ARNOLD, , ,

Mailing Address 771 MEADOW RIDGE DR

City  
COLLIERVILLEState  
TNZip Code  
38017Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LINDBERG, ARNOLD, , ,

Mailing Address 771 MEADOW RIDGE DR

City  
COLLIERVILLEState  
TNZip Code  
38017Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LINDBERG, ARNOLD, , ,

Mailing Address 771 MEADOW RIDGE DR

City  
COLLIERVILLEState  
TNZip Code  
38017Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6312 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. LOPEZ, ALEJANDRA, , ,**

Mailing Address 1978 CORTE AMALIA

City  
SAN YSIDROState  
CAZip Code  
92173Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LOPEZ, ALEJANDRA, , ,**

Mailing Address 1978 CORTE AMALIA

City  
SAN YSIDROState  
CAZip Code  
92173Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LOPEZ, ALEJANDRA, , ,**

Mailing Address 1978 CORTE AMALIA

City  
SAN YSIDROState  
CAZip Code  
92173Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

234.24

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6313 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A.** LYONS, GEORGE, , ,

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

62.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** LYONS, GEORGE, , ,

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** LYONS, GEORGE, , ,

Mailing Address 2732 HIGHWAY 9 S

City  
DAWSONVILLEState  
GAZip Code  
30534Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

48.93

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189.47

	21b		22		23		26		27
X	28a		28b		28c		29		30b

NRCC

A. LYONS, GEORGE, , ,

Date of Disbursement

M M / D D / Y Y Y Y  
02 27 2025

Candidate Name

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

FEC Identification Number

C

Transaction ID : SB28A-0.6517  
Amount of Each Disbursement this Period

49.50

 Memo Item

**B. MACHADO , LIONEL, , ,**

Date of Disbursement

Candidate Name

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) \_\_\_\_\_

State:  District:

FEC Identification Number

C							
---	--	--	--	--	--	--	--

**Transaction ID : SB28A-0.6517**  
Amount of Each Disbursement this Period

52.05

Memo Item

C. MACHADO , LIONEL, . .

Date of Disbursement

M / D / Y  
02 / 02 / 2025

Candidate Name

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

FEC Identification Number

C

**Transaction ID : SB28A-0.651**  
Amount of Each Disbursement this Period

48.93

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

150.48

[illegible]

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6315 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MACHADO , LIONEL , , ,**

Mailing Address 336 AWAKEA RD.

City  
KAILUAState  
HIZip Code  
96734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MACHADO , LIONEL , , ,**

Mailing Address 336 AWAKEA RD.

City  
KAILUAState  
HIZip Code  
96734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MACHADO , LIONEL , , ,**

Mailing Address 336 AWAKEA RD.

City  
KAILUAState  
HIZip Code  
96734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

41.64

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.94

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	26	<input type="checkbox"/>	27
<input checked="" type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NRCC

**A. MACHADO , LIONEL, , ,**

Date of Disbursement

Candidate Name \_\_\_\_\_

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

FEC Identification Number

C

**Transaction ID : SB28A-0.651**  
Amount of Each Disbursement this Period

38.00

 Memo Item

**B. MACHADO , LIONEL, , ,**

Date of Disbursement

MM / DD / YYYY

Candidate Name

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) \_\_\_\_\_

State:  District:

FEC Identification Number

C

**Transaction ID : SB28A-0.6517**  
Amount of Each Disbursement this Period

36.44

Memo Item

C. MACHADO , LIONEL, . .

Date of Disbursement

Candidate Name

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

FEC Identification Number

C

**Transaction ID : SB28A-0.651**  
Amount of Each Disbursement this Period

36.44

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

Diagram illustrating a 2D grid structure with a highlighted path. The grid consists of two rows of nodes. The top row has 10 nodes, and the bottom row has 10 nodes. A path is highlighted in red, starting from the bottom-left node and moving horizontally to the right, then vertically up to the top-right node. The value 110.88 is displayed next to the top-right node.



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6317 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MACHADO , LIONEL, , ,**

Mailing Address 336 AWAKEA RD.

City  
KAILUAState  
HIZip Code  
96734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MACHADO , LIONEL, , ,**

Mailing Address 336 AWAKEA RD.

City  
KAILUAState  
HIZip Code  
96734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MACHADO , LIONEL, , ,**

Mailing Address 336 AWAKEA RD.

City  
KAILUAState  
HIZip Code  
96734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

109.32

	21b		22		23		26		27
X	28a		28b		28c		29		30b

NRCC

**A. MACHADO , LIONEL, , ,**

Date of Disbursement

Purpose of Disbursement	CONTRIBUTION REFUND
-------------------------	---------------------


Candidate Name \_\_\_\_\_

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

FEC Identification Number

**C**   
Transaction ID : SB28A-0.651  
Amount of Each Disbursement this Period

36.44

 Memo Item

**B. MACHADO , LIONEL, , ,**

Date of Disbursement

MM / DD / YYYY

Purpose of Disbursement	CONTRIBUTION REFUND
-------------------------	---------------------

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) \_\_\_\_\_

FEC Identification Number

**C**

**Transaction ID : SB28A-0.6517**

Amount of Each Disbursement this Period

36.44

Memo Item

C. MACHADO , LIONEL, . .

Date of Disbursement

Purpose of Disbursement	CONTRIBUTION REFUND
-------------------------	---------------------

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

FEC Identification Number

**C**

**Transaction ID : SB28A-0.651**

**Amount of Each Disbursement this Period**

36.44

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

109.32

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6319 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. MACHADO , LIONEL, , ,

Mailing Address 336 AWAKEA RD.

City  
KAILUAState  
HIZip Code  
96734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

31.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MACHADO , LIONEL, , ,

Mailing Address 336 AWAKEA RD.

City  
KAILUAState  
HIZip Code  
96734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

27.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MACHADO , LIONEL, , ,

Mailing Address 336 AWAKEA RD.

City  
KAILUAState  
HIZip Code  
96734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

26.03

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

84.33

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6320 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MACHADO , LIONEL , , ,**

Mailing Address 336 AWAKEA RD.

City  
KAILUAState  
HIZip Code  
96734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

26.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MACHADO , LIONEL , , ,**

Mailing Address 336 AWAKEA RD.

City  
KAILUAState  
HIZip Code  
96734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

26.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MACHADO , LIONEL , , ,**

Mailing Address 336 AWAKEA RD.

City  
KAILUAState  
HIZip Code  
96734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

26.03

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.09

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6321 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MACHADO , LIONEL, , ,**

Mailing Address 336 AWAKEA RD.

City  
KAILUAState  
HIZip Code  
96734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

26.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MACHADO , LIONEL, , ,**

Mailing Address 336 AWAKEA RD.

City  
KAILUAState  
HIZip Code  
96734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

26.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MACHADO , LIONEL, , ,**

Mailing Address 336 AWAKEA RD.

City  
KAILUAState  
HIZip Code  
96734Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

26.03

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.09

	21b		22		23		26		27
X	28a		28b		28c		29		30b

NRCC

**A. MACHADO , LIONEL, , ,**

Date of Disbursement

[illegible]Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

FEC Identification Number

C

Transaction ID : SB28A-0.6517

36.44

 Memo Item

**B. MARSH, GARY, , ,**

Mailing Address 11277 KINGSLEY MANOR WAY

Date of Disbursement

Candidate Name

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) \_\_\_\_\_

State:  District:

FEC Identification Number

C							
---	--	--	--	--	--	--	--

**Transaction ID : SB28A-0.6517**  
Amount of Each Disbursement this Period

35.00

Memo Item

C. MARSH, GARY, , ,

Mailing Address 11277 KINGSLEY MANOR WAY

Date of Disbursement

Candidate Name

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

FEC Identification Number

C

**Transaction ID : SB28A-0.651**  
Amount of Each Disbursement this Period

35.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

Age Group	Percentage
18-24	106.44
25-34	100.00
35-44	100.00
45-54	100.00
55-64	100.00
65-74	100.00
75-84	100.00
85+	100.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6323 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MARSH, GARY, , ,**

Mailing Address 11277 KINGSLEY MANOR WAY

City  
JACKSONVILLEState  
FLZip Code  
32225Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARSH, GARY, , ,**

Mailing Address 11277 KINGSLEY MANOR WAY

City  
JACKSONVILLEState  
FLZip Code  
32225Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARSH, GARY, , ,**

Mailing Address 11277 KINGSLEY MANOR WAY

City  
JACKSONVILLEState  
FLZip Code  
32225Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6324 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MARSH, GARY, , ,**

Mailing Address 11277 KINGSLEY MANOR WAY

City  
JACKSONVILLEState  
FLZip Code  
32225Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARSH, GARY, , ,**

Mailing Address 11277 KINGSLEY MANOR WAY

City  
JACKSONVILLEState  
FLZip Code  
32225Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

34.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARSH, GARY, , ,**

Mailing Address 11277 KINGSLEY MANOR WAY

City  
JACKSONVILLEState  
FLZip Code  
32225Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

34.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.30



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6325 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MARSH, GARY, , ,**

Mailing Address 11277 KINGSLEY MANOR WAY

City  
JACKSONVILLEState  
FLZip Code  
32225Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

34.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARSH, GARY, , ,**

Mailing Address 11277 KINGSLEY MANOR WAY

City  
JACKSONVILLEState  
FLZip Code  
32225Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

34.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARSH, GARY, , ,**

Mailing Address 11277 KINGSLEY MANOR WAY

City  
JACKSONVILLEState  
FLZip Code  
32225Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

34.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

103.95

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6326 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MARSH, GARY, , ,**

Mailing Address 11277 KINGSLEY MANOR WAY

City  
JACKSONVILLEState  
FLZip Code  
32225Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

34.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARTINEZ, AMNERIS, , ,**

Mailing Address 4404 LAKEMONT CT

City  
WEST PALM BEACHState  
FLZip Code  
33403Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARTINEZ, AMNERIS, , ,**

Mailing Address 4404 LAKEMONT CT

City  
WEST PALM BEACHState  
FLZip Code  
33403Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

48.93

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.63

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6327 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MARTINEZ, AMNERIS, , ,**

Mailing Address 4404 LAKEMONT CT

City  
WEST PALM BEACHState  
FLZip Code  
33403Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARTINEZ, AMNERIS, , ,**

Mailing Address 4404 LAKEMONT CT

City  
WEST PALM BEACHState  
FLZip Code  
33403Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARTINEZ, AMNERIS, , ,**

Mailing Address 4404 LAKEMONT CT

City  
WEST PALM BEACHState  
FLZip Code  
33403Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

48.93

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

153.03

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6328 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MARTINEZ, AMNERIS, , ,**

Mailing Address 4404 LAKEMONT CT

City  
WEST PALM BEACHState  
FLZip Code  
33403Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

48.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARTZ, DAVID, , ,**

Mailing Address 225 RED BLUFF DRIVE

City  
HICKORY CREEKState  
TXZip Code  
75065Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARTZ, DAVID, , ,**

Mailing Address 225 RED BLUFF DRIVE

City  
HICKORY CREEKState  
TXZip Code  
75065Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

173.93

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6329 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MARTZ, DAVID, , ,**

Mailing Address 225 RED BLUFF DRIVE

City  
HICKORY CREEKState  
TXZip Code  
75065Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARTZ, DAVID, , ,**

Mailing Address 225 RED BLUFF DRIVE

City  
HICKORY CREEKState  
TXZip Code  
75065Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

253.08

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6330 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6331 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

20.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

15.62

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.44

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6332 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
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WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

10.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

10.41

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

35.82



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6333 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

10.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

10.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.82

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6334 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

9.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C** Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.21

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

19.92

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6335 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.21

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6336 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
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WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6337 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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Full Name (Last, First, Middle Initial)

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OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

4.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

4.95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

14.90

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6338 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**A. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
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WIZip Code  
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CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

3.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

1.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

1.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5.12

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6339 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MATTHEWS, EVI, , ,**Mailing Address 1070 CREEKSIDE DR  
APT 107City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 03 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

1.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCCANN, PETER, , ,**

Mailing Address PO BOX 416

City  
GROVEPORTState  
OHZip Code  
43125Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 06 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCDANIEL, MARDI, , ,**

Mailing Address 1327 BAYSHORE COURT

City  
GULF BREEZEState  
FLZip Code  
32563Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 05 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1079.08

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6340 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MCDANIEL, MARDI, , ,**

Mailing Address 1327 BAYSHORE COURT

City  
GULF BREEZEState  
FLZip Code  
32563Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCDANIEL, MARDI, , ,**

Mailing Address 1327 BAYSHORE COURT

City  
GULF BREEZEState  
FLZip Code  
32563Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCKEE, LAURENCE, , ,**

Mailing Address 105 LABRADOR CT

City  
SUMMERVILLEState  
SCZip Code  
29485Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

62.46

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

218.62



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6341 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MCKEE, LAURENCE, , ,**

Mailing Address 105 LABRADOR CT

City  
SUMMERVILLEState  
SCZip Code  
29485Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCKEE, LAURENCE, , ,**

Mailing Address 105 LABRADOR CT

City  
SUMMERVILLEState  
SCZip Code  
29485Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCKEE, LAURENCE, , ,**

Mailing Address 105 LABRADOR CT

City  
SUMMERVILLEState  
SCZip Code  
29485Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

26.03

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.47

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6342 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MCKEE, LAURENCE, , ,**

Mailing Address 105 LABRADOR CT

City  
SUMMERVILLEState  
SCZip Code  
29485Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCKEE, LAURENCE, , ,**

Mailing Address 105 LABRADOR CT

City  
SUMMERVILLEState  
SCZip Code  
29485Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

10.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCKEE, LAURENCE, , ,**

Mailing Address 105 LABRADOR CT

City  
SUMMERVILLEState  
SCZip Code  
29485Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

4.75

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.16

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6343 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MCKEE, LAURENCE, , ,**

Mailing Address 105 LABRADOR CT

City  
SUMMERVILLEState  
SCZip Code  
29485Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

1.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCKEE, LAURENCE, , ,**

Mailing Address 105 LABRADOR CT

City  
SUMMERVILLEState  
SCZip Code  
29485Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

1.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCKEE, LAURENCE, , ,**

Mailing Address 105 LABRADOR CT

City  
SUMMERVILLEState  
SCZip Code  
29485Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

1.03

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3.11

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6344 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MCKEE, LAURENCE, , ,**

Mailing Address 105 LABRADOR CT

City  
SUMMERVILLEState  
SCZip Code  
29485Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

0.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCKEE, LAURENCE, , ,**

Mailing Address 105 LABRADOR CT

City  
SUMMERVILLEState  
SCZip Code  
29485Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

0.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MICHELI, JAMES, , ,**

Mailing Address 879 ROBERT TREAT EXT

City  
ORANGEState  
CTZip Code  
06477Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

205.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

206.90

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6345 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MILLER, LINDA, , ,**

Mailing Address 145 RD 683

City  
GUNTOWNState  
MSZip Code  
38849Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MILLER, LINDA, , ,**

Mailing Address 145 RD 683

City  
GUNTOWNState  
MSZip Code  
38849Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MILLER, LINDA, , ,**

Mailing Address 145 RD 683

City  
GUNTOWNState  
MSZip Code  
38849Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6346 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MILLER, LINDA, , ,**

Mailing Address 145 RD 683

City  
GUNTOWNState  
MSZip Code  
38849Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MILLER, LINDA, , ,**

Mailing Address 145 RD 683

City  
GUNTOWNState  
MSZip Code  
38849Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MILLER, LINDA, , ,**

Mailing Address 145 RD 683

City  
GUNTOWNState  
MSZip Code  
38849Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

95.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

290.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6347 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MILLER, LINDA, , ,**

Mailing Address 145 RD 683

City  
GUNTOWNState  
MSZip Code  
38849Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MITTELSTAEDT, CRAIG, , ,**

Mailing Address 1199 OLSON AVE

City  
OSHKOSHState  
WIZip Code  
54901Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

211.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MONCRIEF, ALICIA, , ,**

Mailing Address 1912 W TULIPTREE DRIVE SE

City  
HUNTSVILLEState  
ALZip Code  
35803Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

406.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6348 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MONCRIEF, ALICIA, , ,**

Mailing Address 1912 W TULIPTREE DRIVE SE

City  
HUNTSVILLEState  
ALZip Code  
35803Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MONCRIEF, ALICIA, , ,**

Mailing Address 1912 W TULIPTREE DRIVE SE

City  
HUNTSVILLEState  
ALZip Code  
35803Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MONGOVEN, CASS, , ,**

Mailing Address 6 SUNSET VIEW DRIVE

City  
CLANCYState  
MTZip Code  
59634Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6349 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MONGOVEN, CASS, , ,**

Mailing Address 6 SUNSET VIEW DRIVE

City  
CLANCYState  
MTZip Code  
59634Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MONGOVEN, CASS, , ,**

Mailing Address 6 SUNSET VIEW DRIVE

City  
CLANCYState  
MTZip Code  
59634Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MUNDY, HARVEY , L , ,**

Mailing Address 914 H HAUN RD

City  
MEYERSVILLEState  
TXZip Code  
77974Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

214.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6350 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. MUNDY, HARVEY, L, ,**

Mailing Address 914 H HAUN RD

City  
MEYERSVILLEState  
TXZip Code  
77974Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MUNDY, HARVEY, L, ,**

Mailing Address 914 H HAUN RD

City  
MEYERSVILLEState  
TXZip Code  
77974Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

26.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MUNDY, HARVEY, L, ,**

Mailing Address 914 H HAUN RD

City  
MEYERSVILLEState  
TXZip Code  
77974Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

48.93

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.96

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6351 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. MUNDY, HARVEY, L, ,

Mailing Address 914 H HAUN RD

City  
MEYERSVILLEState  
TXZip Code  
77974Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

47.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MUNDY, HARVEY, L, ,

Mailing Address 914 H HAUN RD

City  
MEYERSVILLEState  
TXZip Code  
77974Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NELSON, HOWARD, , ,

Mailing Address PO BOX 232

City  
SCOTTSVILLEState  
TXZip Code  
75688Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

157.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6352 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NELSON, HOWARD, , ,**

Mailing Address PO BOX 232

City  
SCOTTSVILLEState  
TXZip Code  
75688Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NELSON, HOWARD, , ,**

Mailing Address PO BOX 232

City  
SCOTTSVILLEState  
TXZip Code  
75688Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

80.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

280.00
--------

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6353 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

80.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

76.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

76.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

232.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6354 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 14 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 14 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 14 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

71.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

217.50

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6355 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

71.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.75

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6356 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 14 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

47.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 14 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 14 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

44.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.30



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6357 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 14 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 14 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 14 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

40.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6358 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 14 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 15 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 14 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

20.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6359 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 14 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

19.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 14 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

18.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NGUYEN, MINH, , ,**Mailing Address 43 MAPLE ST  
APT ACity  
DOVERState  
NHZip Code  
03820Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 14 2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

1.14

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.94

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6360 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NIBLACK, GILES, , ,**

Mailing Address 8333 LULLWATER DR

City  
DALLASState  
TXZip Code  
75218Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

29.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NIBLACK, GILES, , ,**

Mailing Address 8333 LULLWATER DR

City  
DALLASState  
TXZip Code  
75218Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

29.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NIBLACK, GILES, , ,**

Mailing Address 8333 LULLWATER DR

City  
DALLASState  
TXZip Code  
75218Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

29.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6361 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NIBLACK, GILES, , ,**

Mailing Address 8333 LULLWATER DR

City  
DALLASState  
TXZip Code  
75218Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

29.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NIBLACK, GILES, , ,**

Mailing Address 8333 LULLWATER DR

City  
DALLASState  
TXZip Code  
75218Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

29.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NIBLACK, GILES, , ,**

Mailing Address 8333 LULLWATER DR

City  
DALLASState  
TXZip Code  
75218Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

29.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6362 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NIBLACK, GILES, , ,**

Mailing Address 8333 LULLWATER DR

City  
DALLASState  
TXZip Code  
75218Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

29.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NIBLACK, GILES, , ,**

Mailing Address 8333 LULLWATER DR

City  
DALLASState  
TXZip Code  
75218Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

29.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NIBLACK, GILES, , ,**

Mailing Address 8333 LULLWATER DR

City  
DALLASState  
TXZip Code  
75218Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

29.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6363 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NIBLACK, GILES, , ,**

Mailing Address 8333 LULLWATER DR

City  
DALLASState  
TXZip Code  
75218Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

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☐ Memo Item

Full Name (Last, First, Middle Initial)

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Mailing Address 8333 LULLWATER DR

City  
DALLASState  
TXZip Code  
75218Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

29.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NIBLACK, GILES, , ,**

Mailing Address 8333 LULLWATER DR

City  
DALLASState  
TXZip Code  
75218Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

29.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6364 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NIBLACK, GILES, , ,**

Mailing Address 8333 LULLWATER DR

City  
DALLASState  
TXZip Code  
75218Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

29.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NIGENT, SUSAN, , ,**

Mailing Address 2445 FAWNLAKE CIRCLE

City  
KATYState  
TXZip Code  
77493Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NIGENT, SUSAN, , ,**

Mailing Address 2445 FAWNLAKE CIRCLE

City  
KATYState  
TXZip Code  
77493Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

229.70



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6365 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NIGENT, SUSAN, , ,**

Mailing Address 2445 FAWNLAKE CIRCLE

City  
KATYState  
TXZip Code  
77493Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NIGENT, SUSAN, , ,**

Mailing Address 2445 FAWNLAKE CIRCLE

City  
KATYState  
TXZip Code  
77493Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NIGENT, SUSAN, , ,**

Mailing Address 2445 FAWNLAKE CIRCLE

City  
KATYState  
TXZip Code  
77493Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6366 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NOSTIN, JOSEPH, , ,**

Mailing Address 2821 36TH AVE N

City  
SAINT PETERSBURGState  
FLZip Code  
33713Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NOSTIN, JOSEPH, , ,**

Mailing Address 2821 36TH AVE N

City  
SAINT PETERSBURGState  
FLZip Code  
33713Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NOSTIN, JOSEPH, , ,**

Mailing Address 2821 36TH AVE N

City  
SAINT PETERSBURGState  
FLZip Code  
33713Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

234.24

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6367 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. NOSTIN, JOSEPH, , ,**

Mailing Address 2821 36TH AVE N

City  
SAINT PETERSBURGState  
FLZip Code  
33713Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. O'DONNELL, MARY, , ,**

Mailing Address 1184 LYNETTE DRIVE

City  
LAKE FORESTState  
ILZip Code  
60045Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. O'DONNELL, MARY, , ,**

Mailing Address 1184 LYNETTE DRIVE

City  
LAKE FORESTState  
ILZip Code  
60045Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.08

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6368 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. O'DONNELL, MARY, , ,

Mailing Address 1184 LYNETTE DRIVE

City  
LAKE FORESTState  
ILZip Code  
60045Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. O'DONNELL, MARY, , ,

Mailing Address 1184 LYNETTE DRIVE

City  
LAKE FORESTState  
ILZip Code  
60045Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. O'DONNELL, MARY, , ,

Mailing Address 1184 LYNETTE DRIVE

City  
LAKE FORESTState  
ILZip Code  
60045Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

35.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6369 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ONEAL, CYNTHIA, , ,**

Mailing Address 23 AMAZON DR

City  
PUNTA GORDAState  
FLZip Code  
33983Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ONEAL, CYNTHIA, , ,**

Mailing Address 23 AMAZON DR

City  
PUNTA GORDAState  
FLZip Code  
33983Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PACE, SANDY, , ,**

Mailing Address 186 STAN SUMMERS RD

City  
HALLSVILLEState  
TXZip Code  
75650Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

233.20

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6370 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. PACE, SANDY, , ,**

Mailing Address 186 STAN SUMMERS RD

City  
HALLSVILLEState  
TXZip Code  
75650Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PACE, SANDY, , ,**

Mailing Address 186 STAN SUMMERS RD

City  
HALLSVILLEState  
TXZip Code  
75650Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PACE, SANDY, , ,**

Mailing Address 186 STAN SUMMERS RD

City  
HALLSVILLEState  
TXZip Code  
75650Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

  
State: District:Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6371 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. PACE, SANDY, , ,**

Mailing Address 186 STAN SUMMERS RD

City  
HALLSVILLEState  
TXZip Code  
75650Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PACE, SANDY, , ,**

Mailing Address 186 STAN SUMMERS RD

City  
HALLSVILLEState  
TXZip Code  
75650Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PACE, SANDY, , ,**

Mailing Address 186 STAN SUMMERS RD

City  
HALLSVILLEState  
TXZip Code  
75650Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6372 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. PACE, SANDY, , ,**

Mailing Address 186 STAN SUMMERS RD

City  
HALLSVILLEState  
TXZip Code  
75650Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PACE, SANDY, , ,**

Mailing Address 186 STAN SUMMERS RD

City  
HALLSVILLEState  
TXZip Code  
75650Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PACE, SANDY, , ,**

Mailing Address 186 STAN SUMMERS RD

City  
HALLSVILLEState  
TXZip Code  
75650Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6373 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. PACE, SANDY, , ,**

Mailing Address 186 STAN SUMMERS RD

City  
HALLSVILLEState  
TXZip Code  
75650Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PACE, SANDY, , ,**

Mailing Address 186 STAN SUMMERS RD

City  
HALLSVILLEState  
TXZip Code  
75650Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PANDINA, ANTHONY, , ,**

Mailing Address 20413 NE 161ST ST

City  
BRUSH PRAIRIEState  
WAZip Code  
98606Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6374 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. PANDINA, ANTHONY, , ,**

Mailing Address 20413 NE 161ST ST

City  
BRUSH PRAIRIEState  
WAZip Code  
98606Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PEACOCK, MARTIN, , ,**

Mailing Address 440 US HWY 280 EAST

City  
AMERICUSState  
GAZip Code  
31709Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1140.54

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6375 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

9.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

9.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

23.74

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6376 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

124.93

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6377 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

19.80

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

89.80

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6378 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

9.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

9.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

8.91

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27.65

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6379 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

10.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

9.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. POHOST, GERALD , , ,**

Mailing Address 4366 W 8TH STREET

City  
LOS ANGELESState  
CAZip Code  
90005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

29.78

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6380 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. REESON, EVELYN, , ,**

Mailing Address 439 GRAND DRIVE

City  
BIGFORKState  
MTZip Code  
59911Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

49.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. REESON, EVELYN, , ,**

Mailing Address 439 GRAND DRIVE

City  
BIGFORKState  
MTZip Code  
59911Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

49.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. REESON, EVELYN, , ,**

Mailing Address 439 GRAND DRIVE

City  
BIGFORKState  
MTZip Code  
59911Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

49.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.50



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6381 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. REESON, EVELYN, , ,**

Mailing Address 439 GRAND DRIVE

City  
BIGFORKState  
MTZip Code  
59911Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

47.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. REESON, EVELYN, , ,**

Mailing Address 439 GRAND DRIVE

City  
BIGFORKState  
MTZip Code  
59911Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

47.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. REESON, EVELYN, , ,**

Mailing Address 439 GRAND DRIVE

City  
BIGFORKState  
MTZip Code  
59911Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

47.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

142.50

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6382 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. REESON, EVELYN, , ,**

Mailing Address 439 GRAND DRIVE

City  
BIGFORKState  
MTZip Code  
59911Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

42.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. REESON, EVELYN, , ,**

Mailing Address 439 GRAND DRIVE

City  
BIGFORKState  
MTZip Code  
59911Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

42.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. REESON, EVELYN, , ,**

Mailing Address 439 GRAND DRIVE

City  
BIGFORKState  
MTZip Code  
59911Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

42.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

126.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6383 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. REX, MURIEL, , ,**

Mailing Address 8197 VERDURA ST

City  
NAVARREState  
FLZip Code  
32566Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RUDDY, HOLLY, , ,**

Mailing Address 11700 RIDGETOP DR

City  
SHERWOODState  
ARZip Code  
72120Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

260.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RUDDY, HOLLY, , ,**

Mailing Address 11700 RIDGETOP DR

City  
SHERWOODState  
ARZip Code  
72120Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

860.25

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6384 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. SARTI, ED, , ,

Mailing Address 2 OVERLOOK COURT

City  
NORTH CALDWELLState  
NJZip Code  
07006Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651!

Amount of Each Disbursement this Period

260.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SARTI, ED, , ,

Mailing Address 2 OVERLOOK COURT

City  
NORTH CALDWELLState  
NJZip Code  
07006Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651!

Amount of Each Disbursement this Period

260.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SARTI, ED, , ,

Mailing Address 2 OVERLOOK COURT

City  
NORTH CALDWELLState  
NJZip Code  
07006Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

260.25

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

780.75

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6385 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SAULTON, JERRY, , ,**

Mailing Address 2341 JOHNSTOWN RD

City  
HUNTINGTONState  
WVZip Code  
25701Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SAULTON, JERRY, , ,**

Mailing Address 2341 JOHNSTOWN RD

City  
HUNTINGTONState  
WVZip Code  
25701Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SAULTON, JERRY, , ,**

Mailing Address 2341 JOHNSTOWN RD

City  
HUNTINGTONState  
WVZip Code  
25701Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

71.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.75

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6386 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SAULTON, JERRY, , ,**

Mailing Address 2341 JOHNSTOWN RD

City  
HUNTINGTONState  
WVZip Code  
25701Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCHMIDT, BARBARA, , ,**Mailing Address 728 E PLEASANT ST.  
APT 1610City  
MILWAUKEEState  
WIZip Code  
53202Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

330.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SEIFRIED, NANCY, , ,**

Mailing Address 1028 WOODWAY DRIVE

City  
FT MITCHELLState  
KYZip Code  
41017Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

99.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500.25

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6387 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SEIFRIED, NANCY, , ,**

Mailing Address 1028 WOODWAY DRIVE

City  
FT MITCHELLState  
KYZip Code  
41017Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SEIFRIED, NANCY, , ,**

Mailing Address 1028 WOODWAY DRIVE

City  
FT MITCHELLState  
KYZip Code  
41017Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHEEDY, DON, , ,**

Mailing Address 5589 FAIRWAY DR.

City  
BURLINGTONState  
IAZip Code  
52601Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

71.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

269.25

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6388 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SHEEDY, DON, , ,**

Mailing Address 5589 FAIRWAY DR.

City  
BURLINGTONState  
IAZip Code  
52601Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SHEEDY, DON, , ,**

Mailing Address 5589 FAIRWAY DR.

City  
BURLINGTONState  
IAZip Code  
52601Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHEEDY, DON, , ,**

Mailing Address 5589 FAIRWAY DR.

City  
BURLINGTONState  
IAZip Code  
52601Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

71.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.75



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6389 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

47.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

47.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

47.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6390 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

47.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

44.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.30

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6391 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

44.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.95

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6392 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

44.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.95

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6393 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

44.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.95

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6394 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

44.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.95

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6395 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

44.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.95

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6396 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

44.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

44.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.95



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6397 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHEETS, BLAINE, , ,**

Mailing Address 6207 TEZCUCO COURT

City  
GONZALESState  
LAZip Code  
70737Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6398 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. SMITH, MIKE, , ,

Mailing Address 91 WEST 2150 SOUTH

City  
BOUNTIFULState  
UTZip Code  
84010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651!

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SMITH, MIKE, , ,

Mailing Address 91 WEST 2150 SOUTH

City  
BOUNTIFULState  
UTZip Code  
84010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651!

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SMITH, MIKE, , ,

Mailing Address 91 WEST 2150 SOUTH

City  
BOUNTIFULState  
UTZip Code  
84010Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

71.25

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

227.41

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6399 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SOMMERVILLE, WILLIAM, , ,**

Mailing Address 445 BONVUE TERRACE

City  
LAGUNA BEACHState  
CAZip Code  
92651Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

1041.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SPICER, PEGGY, , ,**

Mailing Address 14 WILDWOOD DRIVE

City  
JOPLINState  
MOZip Code  
64804Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SPICER, PEGGY, , ,**

Mailing Address 14 WILDWOOD DRIVE

City  
JOPLINState  
MOZip Code  
64804Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

75.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1216.02

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6400 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SPICER, PEGGY, , ,**

Mailing Address 14 WILDWOOD DRIVE

City  
JOPLINState  
MOZip Code  
64804Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SQUILLANTE, PHYLLIS , A, ,**

Mailing Address 34 DEHAVEN DRIVE

City  
YONKERSState  
NYZip Code  
10703Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SQUILLANTE, PHYLLIS , A, ,**

Mailing Address 34 DEHAVEN DRIVE

City  
YONKERSState  
NYZip Code  
10703Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

75.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6401 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SQUILLANTE, PHYLLIS , A ,**

Mailing Address 34 DEHAVEN DRIVE

City  
YONKERSState  
NYZip Code  
10703Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STONESIFER, FOSTER, , ,**

Mailing Address 791 SELLS STATION ROAD

City  
LITTLESTOWNState  
PAZip Code  
17340Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

260.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STONESIFER, FOSTER, , ,**

Mailing Address 791 SELLS STATION ROAD

City  
LITTLESTOWNState  
PAZip Code  
17340Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

260.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

595.50

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6402 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. STONESIFER, FOSTER, , ,**

Mailing Address 791 SELLS STATION ROAD

City  
LITTLESTOWNState  
PAZip Code  
17340Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

260.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STONESIFER, FOSTER, , ,**

Mailing Address 791 SELLS STATION ROAD

City  
LITTLESTOWNState  
PAZip Code  
17340Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651!**

Amount of Each Disbursement this Period

260.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STONESIFER, FOSTER, , ,**

Mailing Address 791 SELLS STATION ROAD

City  
LITTLESTOWNState  
PAZip Code  
17340Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C****Transaction ID : SB28A-0.651**

Amount of Each Disbursement this Period

260.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

780.75

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6403 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. **STUART, BOB, , ,**

Mailing Address 2 OWL ROAD

City  
LONDONDERRYState  
NHZip Code  
03053Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651!

Amount of Each Disbursement this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. **STUART, BOB, , ,**

Mailing Address 2 OWL ROAD

City  
LONDONDERRYState  
NHZip Code  
03053Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651!

Amount of Each Disbursement this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. **STUART, BOB, , ,**

Mailing Address 2 OWL ROAD

City  
LONDONDERRYState  
NHZip Code  
03053Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

99.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

297.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6404 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. SULLIVAN, MARY, , ,**

Mailing Address 11317 ROBERT CARTER RD

City  
FAIRFAX STATIONState  
VAZip Code  
22039Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SULLIVAN, MARY, , ,**

Mailing Address 11317 ROBERT CARTER RD

City  
FAIRFAX STATIONState  
VAZip Code  
22039Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

71.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SULLIVAN, MARY, , ,**

Mailing Address 11317 ROBERT CARTER RD

City  
FAIRFAX STATIONState  
VAZip Code  
22039Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

71.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

213.75



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6405 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. TERRY, JOHN , K , ,**

Mailing Address 517 COX DRIVE

City  
WEATHERFORDState  
TXZip Code  
76088Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TYNAN, JEFF, , ,**

Mailing Address 6144 NORTH 300 EAST

City  
LEESBURGState  
INZip Code  
46538Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

475.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TYNAN, JEFF, , ,**

Mailing Address 6144 NORTH 300 EAST

City  
LEESBURGState  
INZip Code  
46538Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

475.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1200.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6406 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. **TYNAN, JEFF, , ,**

Mailing Address 6144 NORTH 300 EAST

City  
LEESBURGState  
INZip Code  
46538Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

[REDACTED] 475.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. **VANDEWARK, BARBARA, , ,**

Mailing Address 2090 STONE HOUSE CIRCLE

City  
LINCOLNState  
CAZip Code  
95648Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

[REDACTED] 78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. **VANDEWARK, BARBARA, , ,**

Mailing Address 2090 STONE HOUSE CIRCLE

City  
LINCOLNState  
CAZip Code  
95648Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

[REDACTED] 78.08

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

[REDACTED] 631.16

[REDACTED]

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6407 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. VANDEWARK, BARBARA, , ,**

Mailing Address 2090 STONE HOUSE CIRCLE

City  
LINCOLNState  
CAZip Code  
95648Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WALKER, TERRY, , ,**

Mailing Address 262 BAREFOOT BEACH BOULEVARD PH-4

City  
BONITA SPRINGSState  
FLZip Code  
34134Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

495.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WEST, DEBORAH , A, ,**

Mailing Address 3415 SOUTHBEND DR

City  
DENISONState  
TXZip Code  
75020Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

1041.02

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1614.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6408 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. WHARTON, IRENE, , ,

Mailing Address 640 SAXONY LN

City  
KENNERState  
LAZip Code  
70065Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

48.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WHARTON, IRENE, , ,

Mailing Address 640 SAXONY LN

City  
KENNERState  
LAZip Code  
70065Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WHARTON, IRENE, , ,

Mailing Address 640 SAXONY LN

City  
KENNERState  
LAZip Code  
70065Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

54.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

177.93

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6409 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WHARTON, IRENE, , ,**

Mailing Address 640 SAXONY LN

City  
KENNERState  
LAZip Code  
70065Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WHARTON, IRENE, , ,**

Mailing Address 640 SAXONY LN

City  
KENNERState  
LAZip Code  
70065Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WHARTON, IRENE, , ,**

Mailing Address 640 SAXONY LN

City  
KENNERState  
LAZip Code  
70065Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

252.05

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6410 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. WHARTON, IRENE, , ,

Mailing Address 640 SAXONY LN

City  
KENNERState  
LAZip Code  
70065Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WHITTINGTON, RICHARD, , ,

Mailing Address 4641 S WARREN RD

City  
SPRINGFIELDState  
MOZip Code  
65810Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WHITTINGTON, RICHARD, , ,

Mailing Address 4641 S WARREN RD

City  
SPRINGFIELDState  
MOZip Code  
65810Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

47.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

199.05

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6411 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WHITTINGTON, RICHARD, , ,**

Mailing Address 4641 S WARREN RD

City  
SPRINGFIELDState  
MOZip Code  
65810Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WHITTINGTON, RICHARD, , ,**

Mailing Address 4641 S WARREN RD

City  
SPRINGFIELDState  
MOZip Code  
65810Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WHITTINGTON, RICHARD, , ,**

Mailing Address 4641 S WARREN RD

City  
SPRINGFIELDState  
MOZip Code  
65810Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6412 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WHITTINGTON, RICHARD, , ,**

Mailing Address 4641 S WARREN RD

City  
SPRINGFIELDState  
MOZip Code  
65810Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WIGHT-CHABOT, CHARLOTTE, , ,**

Mailing Address 7 POWHATAN ROAD

City  
PEPPERELLState  
MAZip Code  
01463Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WIGHT-CHABOT, CHARLOTTE, , ,**

Mailing Address 7 POWHATAN ROAD

City  
PEPPERELLState  
MAZip Code  
01463Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

181.16



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6413 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WIGHT-CHABOT, CHARLOTTE, , ,**

Mailing Address 7 POWHATAN ROAD

City  
PEPPERELLState  
MAZip Code  
01463Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WIGHT-CHABOT, CHARLOTTE, , ,**

Mailing Address 7 POWHATAN ROAD

City  
PEPPERELLState  
MAZip Code  
01463Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WILLIAMS, VAN, , ,**

Mailing Address 23318 PRAIRIE PEBBLE CT

City  
KATYState  
TXZip Code  
77494Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

234.24

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6414 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WILLIAMS, VAN, , ,**

Mailing Address 23318 PRAIRIE PEBBLE CT

City  
KATYState  
TXZip Code  
77494Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WILLIAMS, VAN, , ,**

Mailing Address 23318 PRAIRIE PEBBLE CT

City  
KATYState  
TXZip Code  
77494Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WILSON, JAMES, , ,**

Mailing Address 14680 CHALK BLUFF ROAD

City  
NEVADA CITYState  
CAZip Code  
95959Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

234.24

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6415 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. WILSON, JAMES, , ,

Mailing Address 14680 CHALK BLUFF ROAD

City  
NEVADA CITYState  
CAZip Code  
95959Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WILSON, JAMES, , ,

Mailing Address 14680 CHALK BLUFF ROAD

City  
NEVADA CITYState  
CAZip Code  
95959Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WILSON, JAMES, , ,

Mailing Address 14680 CHALK BLUFF ROAD

City  
NEVADA CITYState  
CAZip Code  
95959Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

75.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

228.08

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6416 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. WILSON, JAMES, , ,

Mailing Address 14680 CHALK BLUFF ROAD

City  
NEVADA CITYState  
CAZip Code  
95959Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WILSON, JAMES, , ,

Mailing Address 14680 CHALK BLUFF ROAD

City  
NEVADA CITYState  
CAZip Code  
95959Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

19.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WILSON, JAMES, , ,

Mailing Address 14680 CHALK BLUFF ROAD

City  
NEVADA CITYState  
CAZip Code  
95959Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

19.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

113.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6417 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WILSON, JAMES, , ,**

Mailing Address 14680 CHALK BLUFF ROAD

City  
NEVADA CITYState  
CAZip Code  
95959Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

19.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

201.18

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6418 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6521

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6521

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.6521

Amount of Each Disbursement this Period

104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

312.30

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6419 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

286.28

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6420 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

52.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

182.18



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6421 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.05

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6422 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6423 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

232.18

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6424 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

204.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6425 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652I

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652I

Amount of Each Disbursement this Period

95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652I

Amount of Each Disbursement this Period

95.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

294.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6426 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

36.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

36.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

167.88

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6427 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WILTON , NORMAN, JOSEPH, , III**

Mailing Address 253 STEEPLECHASE AVE

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINEGARDNER, MICHAEL, , ,**

Mailing Address 5711 OLD LOGAN RD

City  
LANCASTERState  
OHZip Code  
43130Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WOLFE, CARMEN, , ,**

Mailing Address 18610 TUSCANY STONE #1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

99.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

369.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6428 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WOLFE, CARMEN, , ,**

Mailing Address 18610 TUSCANY STONE #1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	6			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

49.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WOLFE, CARMEN, , ,**

Mailing Address 18610 TUSCANY STONE #1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	6			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WOLFE, CARMEN, , ,**

Mailing Address 18610 TUSCANY STONE #1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	6			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

24.75

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.25



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6429 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WOLFE, CARMEN, , ,**

Mailing Address 18610 TUSCANY STONE #1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WOLFE, CARMEN, , ,**

Mailing Address 18610 TUSCANY STONE #1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WOLFE, CARMEN, , ,**

Mailing Address 18610 TUSCANY STONE #1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

4.95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

19.95

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6430 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. WOLFE, CARMEN, , ,**

Mailing Address 18610 TUSCANY STONE #1301

City  
SAN ANTONIOState  
TXZip Code  
78258Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

4.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WU, JING, , ,**Mailing Address 55 PIERREPONT ST  
APT 11MCity  
BROOKLYNState  
NYZip Code  
11201Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WU, JING, , ,**Mailing Address 55 PIERREPONT ST  
APT 11MCity  
BROOKLYNState  
NYZip Code  
11201Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

99.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.05

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6431 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. WU, JING, , ,

Mailing Address 55 PIERREPONT ST  
APT 11MCity  
BROOKLYNState  
NYZip Code  
11201Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WU, JING, , ,

Mailing Address 55 PIERREPONT ST  
APT 11MCity  
BROOKLYNState  
NYZip Code  
11201Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WU, JING, , ,

Mailing Address 55 PIERREPONT ST  
APT 11MCity  
BROOKLYNState  
NYZip Code  
11201Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

50.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

248.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6432 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. WU, JING, , ,

Mailing Address 55 PIERREPONT ST  
APT 11MCity  
BROOKLYNState  
NYZip Code  
11201Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652I

Amount of Each Disbursement this Period

49.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WU, JING, , ,

Mailing Address 55 PIERREPONT ST  
APT 11MCity  
BROOKLYNState  
NYZip Code  
11201Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652I

Amount of Each Disbursement this Period

47.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. YOUNG, GAIL, , ,

Mailing Address 3572 N WAREINGWOOD DRIVE

City  
MONTGOMERYState  
ALZip Code  
36109Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652I

Amount of Each Disbursement this Period

208.20

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

305.20

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6433 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

A. ZAGAMI, RAYMOND, , ,

Mailing Address 620 6TH STREET

City  
BROOKLYNState  
NYZip Code  
11215Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ZAGAMI, RAYMOND, , ,

Mailing Address 620 6TH STREET

City  
BROOKLYNState  
NYZip Code  
11215Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ZAGAMI, RAYMOND, , ,

Mailing Address 620 6TH STREET

City  
BROOKLYNState  
NYZip Code  
11215Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

C

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

75.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6434 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ZAGAMI, RAYMOND, , ,**

Mailing Address 620 6TH STREET

City  
BROOKLYNState  
NYZip Code  
11215Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ZAGAMI, RAYMOND, , ,**

Mailing Address 620 6TH STREET

City  
BROOKLYNState  
NYZip Code  
11215Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ZEHNER, CAROLYN, , ,**

Mailing Address 1384 TERRACE WAY

City  
LAGUNA BEACHState  
CAZip Code  
92651Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

104.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

254.10



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6436 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. ZEHNER, CAROLYN, , ,**

Mailing Address 1384 TERRACE WAY

City  
LAGUNA BEACHState  
CAZip Code  
92651Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ZEHNER, CAROLYN, , ,**

Mailing Address 1384 TERRACE WAY

City  
LAGUNA BEACHState  
CAZip Code  
92651Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2025

FEC Identification Number

**C**

Transaction ID : SB28A-0.652

Amount of Each Disbursement this Period

78.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For: 

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.16

59849.05



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6437 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. COXPAC**Mailing Address 975 F ST NW  
STE 300City  
WASHINGTONState  
DCZip Code  
20004Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2025

FEC Identification Number

C

Transaction ID : SB28A-0.651

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15000.00

15000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6438 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. AXADVOCACY**Mailing Address 800 W 47TH ST  
STE 200City  
KANSAS CITYState  
MOZip Code  
64112Purpose of Disbursement  
RECOUNT - LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB29-0.62871

Amount of Each Disbursement this Period

5500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ELLINGER BELL**Mailing Address 308 EAST HIGH ST  
STE 300City  
JEFFERSON CITYState  
MOZip Code  
65101Purpose of Disbursement  
RECOUNT - LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB29-0.65549

Amount of Each Disbursement this Period

20488.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HALL BOOTH SMITH, P.C.**

Mailing Address 191 PEACHTREE ST, NE

City  
ATLANTAState  
GAZip Code  
30303Purpose of Disbursement  
RECOUNT - LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB29-0.6287

Amount of Each Disbursement this Period

3175.34

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

29164.14

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6439 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. HOLMES WEDDLE & BARCOTT**Mailing Address 701 W EIGHTH AVE  
STE 700City  
ANCHORAGEState  
AKZip Code  
99501-3408

Purpose of Disbursement

RECOUNT - LEGAL CONSULTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB29-0.62871

Amount of Each Disbursement this Period

21698.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HOLTZMAN VOGEL JOSEFIK PLLC**Mailing Address 45 NORTH HILL DR  
STE 100City  
WARRENTONState  
VAZip Code  
20186

Purpose of Disbursement

RECOUNT - LEGAL CONSULTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB29-0.62871

Amount of Each Disbursement this Period

54173.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HOLTZMAN VOGEL JOSEFIK PLLC**Mailing Address 45 NORTH HILL DR  
STE 100City  
WARRENTONState  
VAZip Code  
20186

Purpose of Disbursement

RECOUNT - LEGAL CONSULTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	0		2	0	2	5		

FEC Identification Number

**C**

Transaction ID : SB29-0.6792

Amount of Each Disbursement this Period

20030.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95902.55

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6440 OF 6441

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. JONES DAY**

Mailing Address 51 LOUISIANA AVENUE NW

City  
WASHINGTONState  
DCZip Code  
20001-2113

Purpose of Disbursement

RECOUNT - LEGAL CONSULTING

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB29-0.62871

Amount of Each Disbursement this Period

27709.63

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NRCC**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

ALLOCABLE EXPENSES TO LEGAL ACCT

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB29-0.70978

Amount of Each Disbursement this Period

142255.54

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

169965.17

**TOTAL** This Period (last page this line number only).....▶

295031.86

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 6441 OF 6441

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC.09032024

NRCC

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
CHAIN BRIDGE BANK N.A.N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 1445-A LAUGHLIN DRIVE

City

MCLEAN

State

VA

ZIP Code

22101

Original Amount of Loan

15000000.00

Cumulative Payment To Date

3750000.00

Balance Outstanding at Close of This Period

11250000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y Y Y  
10 16 / 2024

Date Due

M M / D D / Y Y Y Y Y Y  
08 31 / 2025

Interest Rate

2.95 % (apr)

Secured:

☒ Yes ☐ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

11250000.00

**TOTALS** This Period (last page in this line only)..... ►

11250000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.